

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED
Jan 31, 2004
Secretary of State**

DOCUMENT# N95000002292

Entity Name: INDEPENDENT SOCIAL SERVICES, INC.

Current Principal Place of Business:

312 E 124TH AVE
TAMPA, FL 33612

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 82749
TAMPA, FL 33682

New Mailing Address:

FEI Number: 59-3319032 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KEITHLY, BARBARA
312 E 124TH AVE
TAMPA, FL 33612

Name and Address of New Registered Agent:

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE:

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: KEITHLY, BARBARA
Address: 312 E 124TH AVE
City-St-Zip: TAMPA, FL 33612

Title: DV () Delete
Name: KEITHLY, ROBBIN
Address: 312 E 124TH AVE
City-St-Zip: TAMPA, FL 33612

Title: TD () Delete
Name: CAMERON, KEVIN
Address: 4805 WEST LAUREL ST #100
City-St-Zip: TAMPA, FL 33607

Title: SD () Delete
Name: BIGAM, NANCY
Address: 3004 W JUILA STREET
City-St-Zip: TAMPA, FL 33629

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: BARBARA KEITHLY

P

01/31/2004

Electronic Signature of Signing Officer or Director

Date