

FILED
Feb 23, 2005 8:00 am
Secretary of State

01-18-2005 90058 043 ****61.25

**2005 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT**

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01042005 Chg-NP CR2E037 (10/03)

DOCUMENT # N96000003324 1. Entity Name FEDERATION OF INTERNET SOLUTION PROVIDERS OF THE AMERICAS, INC.			
Principal Place of Business 131 N.W. 1ST AVE DELRAY BEACH, FL 33444		Mailing Address 131 N.W. 1ST AVE DELRAY BEACH, FL 33483	
2. Principal Place of Business 300 N. Cumberland Suite, Apt. #, etc. Suite 200		3. Mailing Address PO Box 277 Suite, Apt. #, etc.	
City & State JACKSON TN		City & State JACKSON TN	
Zip 38302		Zip 38302	
Country U.S.A.		Country U.S.A.	
4. FEI Number 59-3379948		Applied For ☐ Not Applicable	
5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required			
6. Name and Address of Current Registered Agent MARION, JOE J 131 N.W. 1ST AVE DELRAY BEACH, FL 33444		7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code	
8. 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. I am familiar with, and accept the obligations of registered agent.			
SIGNATURE _____ (NOTE: Registered Agent signature required when resigning) DATE _____			
Filing Fee is \$81.25 Due by May 1, 2005		9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees	
Make check payable to Florida Department of State			
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PO PENNINGTON, JAMES 5 CORDOVA STREET SAINT AUGUSTINE, FL 32084	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	ALBANESE, JOSEPH 7109 TIMBERLAKE RD. LYNCHBURG, VA 24502	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Director Jonathan Harlan PO Box 277 JACKSON, TN 38302
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D RICKERT, MARY P.O. BOX 2218 DUNEDIN, FL 34697	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Director Franc Nemanic 500 East Broward Blvd Ft. Lauderdale, FL 33304
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D PYLE, KEN 500 NORTH ORANGE AVE ORLANDO, FL 32801	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Secretary Greg Hayman 601 N. Neer Creek Drive East Leland, MS 38756
TITLE NAME STREET ADDRESS CITY-ST-ZIP	M MARION, JOSEPH 131 N.W. 1ST AVE DELRAY BEACH, FL 33444	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Treasurer Joseph Albanese 7109 Timberlake Rd Lynchburg, VA 24502
TITLE NAME STREET ADDRESS CITY-ST-ZIP	President WEBER, BLAKE 5050 POPLAR AVE MEMPHIS, TN 38157	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Vice President Gabriel Kincon PO Box 86659 Baton Rouge, LA 70879
12. I hereby certify that the information supplied with this filing does not qualify 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowerments.			
SIGNATURE: _____ Date: 2-15-05 / 844-4444			