FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # N9700002671

1. Corporation Name

FOUNDATION FOR INTERNATIONAL SPACE COMMERCE AND LAW, INC.

Principal Place of Business

Mailing Address

2a Mailing Address

1 NORTH 1ST ST #15 COCOA BEACH FL 32931

SIGNATURE

1 NORTH 1ST ST #15 COCOA BEACH FL 32931

FILED May 04, 1999 8:00 am § Secretary of State

05-04-1999 90077 039 ****70.00





21 .	lace of business	26			05/12/1997	•	•
Suite, Apt.	#. etc.	Suite, Apt. #, etc.			4. FEI Number	,	Applied For
22		27	7		APPLIED FOR		Not Applicable
City & Stat	& State City & State				5. Certificate of Status Desired \$8.75 Additional Fee Required		
Zip	Country	Zip	Country		6. Election Campaign Financing		
— ·	25 29 30				6. Election Campaign Financing Trust Fund Contribution \$5.00 May Be Added to Fees		
24	9. Name and Address of Current		30		10. Name and Address of New Reg		
	5. Haine and Address of Guitain	regions, ou regent	81	Name			
DOUT IOVOT				· ·			
DOVE, JOYCE				82 Street Address (P.O. Box Number is Not Acceptable)			
924 NORTH GADSDEN ST.						<u> </u>	
TALLAHASSEE FL 32303							
			84	City	•	E1 85 Z	ip Code
					and a submitte this statement for the pu	roose of changing	ite registered
office or r	registered agent or both in the State of	Florida, Such change was at	ITHOUSED BY	ine corporation	oration submits this statement for the pu on's board of directors. I hereby accept t	he appointment as	registered
agent. I a	im familiar with, and accept the obligation	ons of, Section 617.0503, Flor	ida Statutes	•			
SIGNATURE	· · · · · · · · · · · · · · · · · · ·					DATE	
40	Signature, typed or printed name of registered agent a	The second secon	Registered Ager	t signature require	d when reinstating) ADDITIONS/CHANGES TO OFFICE		TORS IN 12
12.	OFFICERS AND	DELETE	1.1 TITLE		ABBITTOTOTOTIANGES TO CITY	☐ Chan	
TITLE					•		,,
NAME	LEARY, JAMES D		1.2 NAME		•		
STREET ADDRESS	1 NORTH FIRST ST. #15			1.3 STREET ADDRESS			
CITY-ST-ZIP	COCOA BEACH FL 32931		1.4 CITY-S	T-ZIP		Chan	ge Addition
TITLE	D DELETE		2.1 TITLE			Chari	10 1 Addition
NAME	BELLUCCI, JANICE		2.2 NAME		•		
STREET ADDRESS	158 DEER RUN LANE			TADORESS			
CITY-ST-ZIP	SANTA MARIA CA 93455		2. 4 CITY- 5	ST-ZIP		· 「 Chan	ge Addition
TITLE	D DELETE		3.1 TITLE			. Cuan	1a CL voginou
NAME	ROBERTS, LUCINDA		3.2 NAME				
STREET ADDRESS	1		3.3 STREE	TADORESS			
CITY-ST-ZIP	GAINESVILLE FL 32608		3.4. CITY-S	ST-ZIP			TA 4400
TITLE	D DELETE		4.1 TITLE	4.1 TITLE		Chan	ge Addition
NAME	BROZOWSKI, REGINA		4. 2 NAME		•		
STREET ADDRESS			4.3 STREE	TADDRESS			
CITY-ST-ZIP	ST. PETERSBURG BEACH FL 33		4.4 CITY-S	T-ZIP			
TITLE		☐ DELETE	5.1 TITLE			Chan	ge 🗍 Addition
NAME			5.2 NAME		•	•	
STREET ADDRESS		•	5.3 STREE	TADDRESS		•	
CITY-ST-ZIP			5.4 CITY-S	T-ZIP			
TITLE		☐ DELETE	6.1 TITLE		·	☐ Chan	ge
NAME	}		6.2 NAME	.			
STREET ADDRESS			6.3 STREE	T ADDRESS			1
CITY ST 7ID			6.4 CITY-S	T-ZIP			

14. 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE AND TYPEDER PRINTED NAME OF DESIRED PRINTED PRINTED NAME OF DESIRED PRINTED PRINTED NAME OF DESIRED PRINTED PRINTED NAME OF DESIRED PRINTED PRINTED

R2E037 (11/98)