## 2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P00000005387

Entity Name: INFORMATION SHARING SOLUTIONS, INC.

FILED Apr 29, 2002 8:00 AM Secretary of State

Current Principal Place of Business: New Principal Place of Business:

240 WEST PALMETTO BIRK ROAD 506 SW 1ST STREET STE 220 BOCA RATON, FL 33432

BOCA RATON, FL 33432

Current Mailing Address: New Mailing Address:

P O BOX 1120 P O BOX 273777

BOCA RATON, FL 33429 BOCA RATON, FL 33427

FEI Number: 65-0971583 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired (X)

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

FENICK, RICHARD J II MAXSON, CARL R
100 S.W. 15TH DRIVE 506 SW 1ST STREET
BOCA RATON, FL 33432 BOCA RATON, FL 33432

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: CARL R. MAXSON 04/29/2002

Electronic Signature of Registered Agent Date

This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so (X). Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD ( ) Delete Title: PD (X) Change ( ) Addition

 Name:
 FENICK, RICHARD J II
 Name:
 MAXSON, CARL R

 Address:
 100 SW 15TH DRIVE
 Address:
 506 SW 1ST STREET

 City-St-Zip:
 BOCA RATON, FL 33432
 City-St-Zip:
 BOCA RATON, FL 33432

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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: CARL R. MAXSON PD 04/29/2002