

2004 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED

Mar 10, 2004 08:00 AM
Secretary of State

DOCUMENT # P00000068817

1. Entity Name

INCIDENT SOLUTIONS, INC.



Principal Place of Business
11911 KEATING DRIVE
TAMPA FL 33626

Mailing Address
11911 KEATING DRIVE
TAMPA FL 33626

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number 59-3668014

Applied For
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required



MOORE CR2E034 (11/03)

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

SMITH, WALTER E ESQ
757 ARLINGTON AVE N.
ST. PETERSBURG FL 33701

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

Signature, typed or printed name of registered agent and fee if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00

After May 1, 2004 Fee will be \$550.00

Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE D ☐ Delete
NAME GOFF, DONALD G
STREET ADDRESS 11911 KEATING DRIVE
CITY-ST-ZIP TAMPA FL 33626

☐ Change ☐ Addition
U000000083302
03/10/04-80033-025 150.00

TITLE D ☐ Delete
NAME MCGOURIN, JAMES P
STREET ADDRESS 11911 KEATING DRIVE
CITY-ST-ZIP TAMPA FL 33626

☐ Change ☐ Addition

TITLE D ☐ Delete
NAME PEEKE, JOHN L
STREET ADDRESS 11911 KEATING DRIVE
CITY-ST-ZIP TAMPA FL 33626

☐ Change ☐ Addition

TITLE D ☐ Delete
NAME SHAW, MICHAEL D
STREET ADDRESS 11911 KEATING DRIVE
CITY-ST-ZIP TAMPA FL 33626

☐ Change ☐ Addition

TITLE D ☐ Delete
NAME WHITEHEAD, ERWIN E
STREET ADDRESS 11911 KEATING DRIVE
CITY-ST-ZIP TAMPA FL 33626

☐ Change ☐ Addition

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Change ☐ Addition
TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 19.07(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 607, 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 empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

James P. McGowan

18 FEB 2004

813 827 4049