

2005 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P00000091251

FILED
Sep 13, 2005
Secretary of State

Entity Name: INNOVATIVE SOLUTIONS & ASSOCIATES, INC.

Current Principal Place of Business:

7027 W BROWARD BLVD STE 270
PLANTATION, FL 33317

New Principal Place of Business:

Current Mailing Address:

7027 W BROWARD BLVD STE 270
PLANTATION, FL 33317

New Mailing Address:

FEI Number: 65-1049863

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

THOMPSON, GARY W
7027 W BROWARD BLVD
STE 270
PLANTATION, FL 33317 US

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: P () Delete
Name: THOMPSON, G. WAYNE
Address: 7027 W BROWARD BLVD STE 270
City-St-Zip: PLANTATION, FL 33317

Title: S () Delete
Name: THOMPSON, CHRISTINE J
Address: 7027 W BROWARD BLVD STE 270
City-St-Zip: PLANTATION, FL 33317

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: T () Change (X) Addition
Name: LAMAR, DELORES
Address: 7027 WEST BROWARD BLVD, SUITE 270
City-St-Zip: PLANTATION, FL 33317

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: GARY W. THOMPSON

P

09/13/2005

Electronic Signature of Signing Officer or Director

Date