

**FILED**  
**May 01, 2003 8:00 am**  
**Secretary of State**

05-01-2003 90828 041 \*\*\*150.00

**FOR PROFIT CORPORATION**  
**UNIFORM BUSINESS REPORT (UBR)**

DOCUMENT # P02000098708

1. Entity Name

INTERNET SERVICES, INC.

**DO NOT WRITE IN THIS SPACE**

90119059

2. Principal Place of Business  
605 NORTH MOORE ST.

3. Mailing Address  
P. O. BOX 672

DO NOT WRITE IN THIS SPACE

City & State  
BUNNELL, FL

City & State  
BUNNELL, FL

4. FEI Number  
16-1630068

Applied For  
Not Applicable

Zip  
32110

Country  
USA

Zip  
32110

Country  
USA

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

**DO NOT WRITE  
IN THIS SPACE**

7. Name and Address of Current Registered Agent

Name  
S. R. NEELY

Street Address (P. O. Box Number is Not Acceptable)

605 NORTH MOORE ST

City  
BUNNELL

FL

Zip Code  
32110

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.

SIGNATURE

*S R Neely*

S. R. NEELY

04/28/03

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

(Print), Registered Agent signature required when transferring

DATE

9. This corporation is eligible to satisfy its intangible  
Tax filing requirement and elects to do so. ☐  
(See criteria on back)

January 1 - May 1 Fee is \$150.00

After May 1, Fee is \$550.00

Amended UBR is \$61.25

Make Check Payable to Department of State

10. Election Campaign Financing  
Trust Fund Contribution. ☐

\$5.00 May Be  
Added to Fees

11. OFFICERS AND DIRECTORS

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP

P/D S. R. NEELY

605 NORTH MOORE STREET

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP

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**DO NOT WRITE  
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13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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 11 or on an attachment with an address, with all other like empowered

SIGNATURE:

*S R Neely*

S. R. NEELY

04/28/03

386 267 0066 X113

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

DATE

Daytime Phone #

CR2E034B (12/01)