2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jul 01, 2004
Secretary of State

DOCUMENT# P03000143736

Entity Name: INVESTORS' SECURITY TRUST COMPANY

Current Principal Place of Business:

12800 UNIVERSITY DR, STE 125
FT MYERS, FL 33907

New Principal Place of Business:

Current Mailing Address:

12800 UNIVERSITY DR, STE 125
FT MYERS, FL 33907

New Mailing Address:

FEI Number: 20-0065695 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

IDELSON, CHARLES K PRES
12800 UNIVERSITY DR., STE 125
FORT MYERS, FL 33907

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: CHARLES K. IDELSON 07/01/2004
Electronic Signature of Registered Agent Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: D ( ) Delete
Name: BECKWITH, SAMIRA K
Address: 17080 HARBOUR POINT DR #1212
City-St-Zip: FT MYERS, FL 33908

Title: D ( ) Delete
Name: HERSCH, CRAIG R
Address: PO BOX 400
City-St-Zip: FT MYERS, FL 33902

Title: D ( ) Delete
Name: IDELSON, CHARLES K
Address: 13792 PINE VILLA LANE
City-St-Zip: FT MYERS, FL 33912

Title: D ( ) Delete
Name: JONES, DAVID M
Address: 483 E GULF DR
City-St-Zip: SANIBEL, FL 33957

Title: D ( ) Delete
Name: KAGAN, ELIZABERTH P
Address: 6981 LAKE DEVONWOOD DR
City-St-Zip: FT MYERS, FL 33908

Title: D ( ) Delete
Name: KIRBY, LYNN A
Address: 15120 HARBOUR ISLE DR, UNIT 701
City-St-Zip: FT MYERS, FL 33908

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

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

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

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: CHARLES K. IDELSON PRES 07/01/2004
Electronic Signature of Signing Officer or Director Date