

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000143736

FILED
Feb 03, 2009
Secretary of State

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:

IDELSON, CHARLES K
12800 UNIVERSITY DR, STE 125
FT MYERS, FL 33907 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

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: 7268 HEAVEN LANE
City-St-Zip: FORT MYERS, FL 33908

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: 1406 SE 46TH LANE, UNIT #4
City-St-Zip: CAPE CORAL, FL 33904

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 exemption stated in Chapter 119, 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

CEO

02/03/2009

Electronic Signature of Signing Officer or Director

Date