FILE NOW: FILING FEE IS \$61.25

NONPROFIT **CORPORATION ANNUAL REPORT**

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT #

(1)

THE INTERNATIONAL SOCIETY OF STRESS ANALYSTS, I

FILED May 14 1998 8:00am Secretary of State

|--|

NC.							
Principal Place of Business Mailing Address					T NORTHOUGH HAL HINDS BALLY ON ONLY OF THE ORDER ON ALL FIRMS OF THE HARD OF THE CONTROL OF THE		
9 WESTCHESTER DR. KISSIMMEE FL 34744 9 WESTCHESTER DR. KISSIMMEE FL 34744					3. Date incorporated or Qualified 06/30/1987		
					4. FEI Number Applied For		
					23-7304712 Not Applicable		
2. Principal Place of Business 2a. Mailing Address			ldress		5. Certificate of Status Desired \$8.75 Additional		
21 26					Fee Required		
Suite, Apt. #, etc. Suite, Ap. 27			#, etc.		6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees		
City & State City & State			е		7. Is this nonprofit corporation a homeowners association?		
28				☐ Yes ☐ No			
Zip	Country Zip			ountry	8. This corporation owes or has paid the current year Intangible		
24	25	29	30	1	Personal Property Tax due June 30. Yes No		
9. Name and Address of Current Registered Agent				81 Nam	10. Name and Address of New Registered Agent		
				81 Nam	ame .		
	WILLIAM I., JR.			62 Stree	reet Address (P.O. Box Number is Not Acceptable)		
	CHESTER DR. IEE FL 34744			83			
MMICGIA	ICE FL 34/44						
	Pi.			64 City	FL 85 Zip Code		
11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered							
agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.							
SIGNATURE Signature, typod or printed name of registered agent and title II applicable. (NOTE: Registered Agent signature required when reinstating) DATE							
12.		D DIRECTORS	11		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	P/D		DELETE 1.	TITLE	PRESIDENT/DIRECTOR Change Addition		
NAME	REID, ERNEST C.		13	NAME	MARVIN MC CORKLE		
STREET ADDRESS	46 TURNER ST.		1.3	STREET ADDRES	RESS 100 INMAN DRIVE		
CITY-ST-ZIP	DEDHAM MA 02026		1/	CITY-ST-ZIP			
TITLE	V/D		DELETE 2.	TITLE	VICE- PRESIDENT/OIR Change Addition		
NAME	MC CORKLE, BUD		2.2	NAME	E. GARY BAKER. 8700 EINERNOS AVE. SUITE A-SOL		
STREET ADDRESS	100 INMAN DR.		2.3	STREET ADDRES	HESS 8700 CIDECAND AVE. JULIE AT THE		
CITY-ST-ZIP	INGALLSRE IN 46408			4 CITY - ST - ZIP			
TITLE	T/D	Ц		TITLE	VICE - PEES IDENTY DIR Change Addition		
NAME	MCQUISTON, VERONICA			NAME	JERRY POWDEILL 906 WINFIELD STREET		
STREET ADDRESS	1442 WOOD LAKE CIRCLE			STREET ADDRES	12. 44-14-14 74-193		
CITY-ST-ZIP	ST. CLOUD FL 34772			I. CITY-ST-ZIP			
TITLE	D MCCORKLE,MARVIN E.		•	2 NAME	VILL PRODUCTION		
NAME CIDEET ADODECC					DECE DO NAY (90		
STREET ADDRESS	6003 GUION RD. INDIANAPOLIS IN			3 STREET ADDRES 1 City-St-Zip	1 1 100 100 1 10 1 9 57 10		
CITY-ST-ZIP TITLE	V/D			TITLE	☐ Change ☐ Addition		
NAME	ERASMUS, JOHN	_		NAME	_ ,		
STREET ADDRESS	PO BOX 55111 (N/A)			STREET ADDRES	RESS		
CITY-ST-ZIP	NORTHLANDS 2116 SO. AFI	RICA		CITY-ST-ZIP	- T		
TITLE	8/D			I TITLE	Change Addition		
NAME	AMES, WILLIAM I., JR.		6.2	NAME			
STREET ADDRESS	9 WESTCHESTER DR.		6.3	STREET ADDRES	RESS		
CITY-ST-ZIP	KISSIMMEE FL 34744		6.4	CITY-ST-ZIP			
44)	and the state of t	241 41 1 200 1	112 2 11		-1-4-d in Continue (40 07/01/1) Florido Chatatan I familiar and father the information		

Interest countries in information supplied with this ming does not qualify for the exemption stated in Section 119.07(3)(1), Florida Statutes. I further certify that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.