

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Morham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P33503 (4)

1. Corporation Name

INDEPENDENT MOBILITY SYSTEMS, INC.

Principal Place of Business

**4100 W PIEDRAS
FARMINGTON NM 87401**

Mailing Address

**4100 W PIEDRAS
FARMINGTON NM 87401**

3. Date Incorporated or Qualified

04/91/1991

3a. Date of Last Report

03/13/95

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc

26 Suite, Apt. #, etc

22 City & State

27 City & State

23 Zip

Country

28 Zip

Country

24

25

29

30

4. FEI Number

85-0355557

Applied For

Not Applicable

5. Certificate of Status Desired

☐ **\$8.75 Additional
Fee Required**

6. Election Campaign Financing
Trust Fund Contribution

☐ **\$5.00 May Be
Added to Fees**

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

**PLANK, DANIEL F.
1771-71 RED CEDAR DRIVE
FT MYERS FL 33907**

10. Name and Address of New Registered Agent

81 Name

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

83

84 City

FL

85

Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, 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 607.0505, Florida Statutes.

SIGNATURE

[Signature]

(NOTE: Registered Agent's signature is required when re-appointing)

[Signature]

3-19-96

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE

NAME **PD ANESI, GREG**
STREET ADDRESS **4100 WEST PIEDRAS**
CITY-ST-ZIP **FARMINGTON NM 87401**

TITLE ☐ DELETE

NAME **VD DUMAS, ROCKY**
STREET ADDRESS **4100 WEST PIEDRAS**
CITY-ST-ZIP **FARMINGTON NM 87401**

TITLE ☐ DELETE

NAME **THORNTON, JANET**
STREET ADDRESS **4100 WEST PIEDRAS**
CITY-ST-ZIP **FARMINGTON NM 87401**

TITLE ☐ DELETE

NAME **D WEISEROD, RICK**
STREET ADDRESS **4100 WEST PIEDRAS**
CITY-ST-ZIP **FARMINGTON NM 87401**

TITLE ☒ DELETE

NAME **T RODOLPH, KEITH**
STREET ADDRESS **4100 WEST PIEDRAS**
CITY-ST-ZIP **FARMINGTON NM 87401**

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE ☐ Change ☒ Addition

12 NAME **T HART, TERRY**
13 STREET ADDRESS **4100 WEST PIEDRAS**
14 CITY-ST-ZIP **FARMINGTON NM 87401**

21 TITLE ☐ Change ☐ Addition

22 NAME
23 STREET ADDRESS
24 CITY-ST-ZIP

31 TITLE ☐ Change ☐ Addition

32 NAME
33 STREET ADDRESS
34 CITY-ST-ZIP

41 TITLE ☐ Change ☐ Addition

42 NAME
43 STREET ADDRESS
44 CITY-ST-ZIP

51 TITLE ☐ Change ☐ Addition

52 NAME
53 STREET ADDRESS
54 CITY-ST-ZIP

61 TITLE ☐ Change ☐ Addition

62 NAME
63 STREET ADDRESS
64 CITY-ST-ZIP

900001774789
-04/10/96--01013--004
*****200.00**

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

[Signature]

TERRY J. HART

3/20/96

(505) 326-4538

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

DATE OF FILING AND FILING FEE

CR2E034 (12/95)

4-9-96