

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

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra E. Mortman
Secretary of State
DIVISION OF CORPORATIONS

**APPROVED
AND
FILED**

95 MAY -1 PM 1:55

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P36658 (3)
1. Corporation Name:
SOUTHWEST INTERSTATE-INFORMATION SERVICES, INC.

Principal Office in Florida: 740 EAST HIGHLAND AVENUE #103 PHOENIX AZ 85011
Mailing Address: 740 EAST HIGHLAND AVENUE #103 PHOENIX AZ 85011

DO NOT WRITE IN THIS SPACE

3. Date incorporated or Qualified 12/09/1991	3a. Date of Last Report 07/06/1994
4. FE Number 86-0662396	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 not only, but subject to the power to, pay all Florida taxes ☐ Yes ☒ No	

2. Principal Office in Florida 21. Suite Suite 200	2a. Mailing Address 26. Suite Suite 200
22. City 85014	27. City 85014
23. State 25	28. State 30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**CT CORPORATION SYSTEM
1200 S. PINE ISLAND ROAD
PLANTATION FL 33324**

81. Name	85. Zip Code FL
82. Street Address (P.O. Box Number is Not Acceptable)	
83. City	
84. State	

11. I, the undersigned, the principal officer or secretary of the corporation, hereby certify that the foregoing information is true and correct, and that the corporation is in good standing with the State of Florida, and that the corporation is not delinquent in the payment of any taxes or fees due to the State of Florida.

SIGNATURE

12. OFFICERS AND DIRECTORS	13. AUTHORIZED SIGNERS TO COLLECT FEES AND OTHER CHARGES
NAME CDT BRUNET, NANCY L. 7334 WEST SIERRA PEORIA AZ	NAME [] Change [] Add
NAME VCD COPELAND, WILLIAM D. 1034 WEST MENDOZA AVE. MESA AZ	NAME [] Change [] Add
NAME PS COPELAND, WILLIAM D. 1034 WEST MENDOZA AVE. MESA AZ	NAME [] Change [] Add
NAME [] Change [] Add	NAME [] Change [] Add
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NAME [] Change [] Add	NAME [] Change [] Add
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NAME [] Change [] Add	NAME [] Change [] Add
NAME [] Change [] Add	NAME [] Change [] Add

14. I, the undersigned, certify that the information supplied with this report is true and correct, and that the corporation is in good standing with the State of Florida, and that the corporation is not delinquent in the payment of any taxes or fees due to the State of Florida.

SIGNATURE: *William D. Copeland* April 1, 1995 (602) 234 3763
DIRECTOR AND TYPED OR PRINTED NAME OF DIRECTOR OR SECRETARY