

## 2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P94000049699

1. Entity Name  
INFORMATION SYSTEMS PROFESSIONAL CONSULTING, INCPrincipal Place of Business  
11863 MESIA COURT SOUTH  
JACKSONVILLE FL 32223Mailing Address  
11863 MESIA COURT SOUTH  
JACKSONVILLE FL 322232. Principal Place of Business  
876 CLOUDBERRY BRANCH WAY3. Mailing Address  
876 CLOUDBERRY BRANCH WAY

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State  
JACKSONVILLE, FLCity & State  
JACKSONVILLE, FLZip  
32259Country  
ST. JOHNSZip  
32259Country  
ST. JOHNS

## 6. Name and Address of Current Registered Agent

HOY, JOHN R JR.  
11863 MESIA COURT SOUTH  
JACKSONVILLE FL 322234. FEI Number  
59-3253985  
Applied For  
Not Applicable5. Certificate of Status Desired  
 \$8.75 Additional  
Fee Required

## 7. Name and Address of New Registered Agent

Name  
HOY, JOHN R JR.

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

876 CLOUDBERRY BRANCH WAY

City  
JACKSONVILLEFL Zip Code  
32259

8. 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

JOHN R. HOY JR. - PRESIDENT

3/1/02

Signature, Typed or Printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible  
Tax filing requirement and elects to do so.  
(See criteria on back) FILE NOW!!! FEE IS \$150.00  
After May 1, 2002 Fee will be \$550.00  
Make Check Payable to Department of State10. Election Campaign Financing  
Trust Fund Contribution.  \$5.00 May Be  
Added to Fees

## 11. OFFICERS AND DIRECTORS

## 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIPTITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

13. I hereby certify that the information supplied with this filing does not qualify 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 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE

JOHN R HOY JR. - PRESIDENT 3/1/02 (904) 982-0146

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

0028213  
AV

CR2E034 (9/01)