

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

FILED
96 MAY -1 PM 2:05
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P95000016108 (9)

1. Corporation Name

INTERNET ASSOCIATION GROUP, INC.



Principal Place of Business

7901 BAYMEADOWS WAY
SUITE 25
JACKSONVILLE FL 32256

Mailing Address

7901 BAYMEADOWS WAY
SUITE 25
JACKSONVILLE FL 32256

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Country

24 25 26 27 28 29 30

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Country

3. Date Incorporated or Qualified
02/24/1995

3a. Date of Last Report

4. FEI Number

59-3163842

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

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

INGHAM, LINDA C
1200 RIVERPLACE BLVD.
SUITE 800
JACKSONVILLE FL 32207

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 of officer or director of corporation

Signature of Registered Agent

Date

12. OFFICERS AND DIRECTORS

TITLE D
NAME INGHAM, JAMES H
STREET ADDRESS 7901 BAYMEADOWS WAY, SUITE 25
CITY- ST- ZIP JACKSONVILLE FL 32256

TITLE D
NAME INGHAM, LINDA C
STREET ADDRESS 7901 BAYMEADOWS WAY, SUITE 25
CITY- ST- ZIP JACKSONVILLE FL 32256

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1. TITLE
2. NAME
3. STREET ADDRESS
4. CITY- ST- ZIP

2. TITLE
2. NAME
2. STREET ADDRESS
2. CITY- ST- ZIP

3. TITLE
3. NAME
3. STREET ADDRESS
3. CITY- ST- ZIP

4. TITLE
4. NAME
4. STREET ADDRESS
4. CITY- ST- ZIP

5. TITLE
5. NAME
5. STREET ADDRESS
5. CITY- ST- ZIP

6. TITLE
6. NAME
6. STREET ADDRESS
6. CITY- ST- ZIP

2000001821122
05/14/96 0121 012
****200.00 ****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 113.07(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 AND TYPE OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

JAMES H INGHAM / 1-3-96 904 737-9550

0363

CR2E034 (12/95)