

2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 23, 2007 8:00 am
Secretary of State

04-23-2007 90092 003 ***150.00

DOCUMENT # P95000016108

1. Entity Name
INTERNET ASSOCIATION GROUP, INC.



Principal Place of Business

**27600 CHAGRIN BLVD.
SUITE 300
WOODMERE, OH 44122 US**

Mailing Address

**27600 CHAGRIN BLVD.
SUITE 300
WOODMERE, OH 44122 US**

2. Principal Place of Business - No P.O. Box #

23245 Mercantile Rd.
Suite, Apt. #, etc.

3. Mailing Address

23245 Mercantile Rd.
Suite, Apt. #, etc.



01252007 Chg-P CR2E034 (12/06)

City & State

Beachwood, Ohio

Zip Country
44122 USA

City & State

Beachwood, Ohio

Zip Country
44122 USA

4. FEI Number

59-3405785
~~59-3463342~~

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

**CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301**

7. Name and Address of New Registered Agent

Name

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

City

FL

Zip Code

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2007 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE **D** ☒ Delete
NAME **INGHAM, JAMES H**
STREET ADDRESS **4500 SALISBURY ROAD SUITE 350**
CITY-ST-ZIP **JACKSONVILLE, FL 32216**

TITLE **D** ☒ Delete
NAME **INGHAM, LINDA C**
STREET ADDRESS **4500 SALISBURY ROAD SUITE 350**
CITY-ST-ZIP **JACKSONVILLE, FL 32216**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **P** ☐ Change ☒ Addition
NAME **Cowling, Robert A**
STREET ADDRESS **Tower Business Pk Kelvedon Rd.**
CITY-ST-ZIP **Toptree Essex, CO 9LX**

TITLE **V** ☐ Change ☒ Addition
NAME **Tuttle, Peter**
STREET ADDRESS **23245 Mercantile Rd.**
CITY-ST-ZIP **Beachwood, Ohio 44122**

TITLE **S** ☐ Change ☒ Addition
NAME **Aiello, Maria**
STREET ADDRESS **23245 Mercantile Rd.**
CITY-ST-ZIP **Beachwood, Ohio 44122**

TITLE **T** ☐ Change ☒ Addition
NAME **Cowling, John M.**
STREET ADDRESS **Tower Business Pk Kelvedon Rd.**
CITY-ST-ZIP **Toptree Essex, CO 9LX**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Peter D Tuttle
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

11/30/2007

Date

216-595-1632

Daytime Phone #