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May 16 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



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

DOCUMENT # P95000019157 (3)

1. Corporation Name
JACKSONVILLE INTERNET SERVICES, INC.



Principal Place of Business
6900 PHILLIPS HWY
SUITE 26
JACKSONVILLE FL 32216-6058

Mailing Address
6900 PHILLIPS HWY
SUITE 26
JACKSONVILLE FL 32216-6058

3. Date Incorporated or Qualified 03/07/1995
3a. Date of Last Report 05/01/1996

4. FEI Number 59-3301772
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

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip

24 Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip

29 Country

9. Name and Address of Current Registered Agent

MANNING, LAURIE D
6900 PHILLIPS HWY
SUITE 26
JACKSONVILLE FL 32216-6058

10. Name and Address of New Registered Agent

81 Name Marc Harrell
82 Street Address (P.O. Box Number is Not Acceptable) 6900 Phillips Highway
83 St. 26
84 City Jacksonville FL 85 Zip Code 32216

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 and assume the obligations of Section 607.0505, Florida Statutes.

SIGNATURE: [Signature] DATE: 5/1/97
(NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS

TITLE	P	DELETE
NAME	HARRELL, MARC L	
STREET ADDRESS	1808 SEMINOLE RD	
CITY - ST - ZIP	ATLANTIC BEACH FL	
TITLE	D	DELETE
NAME	MANNING, MATTHEW S	
STREET ADDRESS	11475 STINGER WAY	
CITY - ST - ZIP	JACKSONVILLE FL 32223-7377	
TITLE	D	DELETE
NAME	MANNING, LAURIE D	
STREET ADDRESS	11475 STINGER WAY	
CITY - ST - ZIP	JACKSONVILLE FL 32223-7377	
TITLE	D	DELETE
NAME	PANTAZI, THOMAS G	
STREET ADDRESS	4766 SECRET HARBOR DR.	
CITY - ST - ZIP	JACKSONVILLE FL 32257	
TITLE		DELETE
NAME		
STREET ADDRESS		
CITY - ST - ZIP		
TITLE		DELETE
NAME		
STREET ADDRESS		
CITY - ST - ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	Change	Addition
1.2 NAME		
1.3 STREET ADDRESS		
1.4 CITY - ST - ZIP		
2.1 TITLE	Change	Addition
2.2 NAME		
2.3 STREET ADDRESS		
2.4 CITY - ST - ZIP		
3.1 TITLE	Change	Addition
3.2 NAME		
3.3 STREET ADDRESS		
3.4 CITY - ST - ZIP		
4.1 TITLE	Change	Addition
4.2 NAME		
4.3 STREET ADDRESS		
4.4 CITY - ST - ZIP		
5.1 TITLE	Change	Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY - ST - ZIP		
6.1 TITLE	Change	Addition
6.2 NAME		
6.3 STREET ADDRESS		
6.4 CITY - ST - ZIP		

14. I do 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 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] SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/30/97 904 296-1201
Date Daytime Phone #

CR2E034 (9/96)