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May 04 1998 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1998



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

DOCUMENT # P95000078456 (7)

1. Corporation Name

INTERNATIONAL DIGITAL SYSTEMS CORPORATION

Principal Place of Business

Mailing Address

489 BALLARD DRIVE
MELBOURNE FL 32935
US

POST OFFICE BOX 361001
MELBOURNE FL 32936-1001



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

2a. Mailing Address

21 479 BALLARD DRIVE
Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 MELBOURNE, FL

28 Zip

24 32935 Country

29 Zip Country

30 US

3. Date Incorporated or Qualified

10/12/1995

4. FEI Number

59-3339618

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 owes or has paid the current year Intangible
Personal Property Tax due June 30. ☒ Yes ☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

HINKLEMON, LINDA L
1390 MELIAS STREET NW
PALM BAY FL 32907

81 Name

PARSONS, GREGORY

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

2566 ANDREWS AVENUE

83

84 City

MELBOURNE

FL

85 Zip Code

32935

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

GREG R. PARSONS

20 APR 98

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE PD
NAME LARSON, JAMES P
STREET ADDRESS 2566 ANDREWS AVENUE
CITY-ST-ZIP MELBOURNE FL 32935

1.1 TITLE PD
1.2 NAME Larson, James P
1.3 STREET ADDRESS 291 Anthony Ave, SE
1.4 CITY-ST-ZIP Palm Bay, FL 32909

TITLE SD
NAME PARSONS, GREGORY R
STREET ADDRESS 2566 ANDREWS AVENUE
CITY-ST-ZIP MELBOURNE FL 32935

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

TITLE TD
NAME WINSCHUH, PAUL C
STREET ADDRESS 371 HURST ROAD, NE
CITY-ST-ZIP PALM BAY FL

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

TITLE VD
NAME HINKLEMON, KENNETH L
STREET ADDRESS 1390 HEILAS STREET NW
CITY-ST-ZIP PALM BAY FL

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

TITLE D
NAME PARSONS, DENISE F
STREET ADDRESS 2566 ANDREWS AVENUE
CITY-ST-ZIP MELBOURNE FL 32935

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

TITLE D
NAME LARSON, GAYLE MARIE
STREET ADDRESS 2566 ANDREWS AVENUE
CITY-ST-ZIP MELBOURNE FL 32935

6.1 TITLE D
6.2 NAME Larson, Gayle-Marie
6.3 STREET ADDRESS 291 Anthony Ave, SE
6.4 CITY-ST-ZIP Palm Bay, FL 32909

14. 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 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

GREG R. PARSONS

CFR2E034 (10/97)