## FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

**PROFIT CORPORATION** ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

### **Katherine Harris**

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # P95000092059

1. Corporation Name ICS GROUP, INC

# FILED May 04, 1999 8:00 am Secretary of State

05-04-1999 90046 008 \*\*\*150.00

100 0110	or, mo					
Principal Place	of Business	Mailing Address				(
2146 5TH AVENUE		2146 5TH AVENUE				
VERO BEACH F		VERO BEACH FL 32960			DO NOT WRITE IN THIS SPACE	
						3. Date Incorporated or Qualifed
						12/01/1995
2. Principal Pl	ace of Business	2a, Mailing Address				4. FEI Number Applied For
21		26				65-0625407 Not Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.				5. Certificate of Status Desired   \$8.75 Additional
22		27				5. Certificate of Status Desired Fee Required
City & State		City & State				6. Election Campaign Financing \$5.00 May Be
23		28				Trust Fund Contribution Added to Fees
Zip	Country Zip Co		intry		8. This corporation owes the current year Intangible	
24	25	29	30			Personal Property Tax.
	9. Name and Address of Curren	t Registered Agent		04	Name	10. Name and Address of New Registered Agent
MUD	PHY, LEWIS W JR.,ESQ			81	Name	·
	s, Henderson, van gaasbeg	CK ET AL		82	Street A	Address (P.O. Box Number is Not Acceptable)
	BEACHLAND BLVD.	on, et ae		83		
	D BEACH FL 32963			တ		
VEI II	DENOTITE GEOOG			84	City	FL 85 Zip Code
		0 CO7 4500 Flda Ptot.	too the e	<u> </u>	named c	
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 ar	m familiar with, and accept the obligation	tions of, Section 607.0505, Fl	orida Stati	utes.		
SIGNATURE	Signature, typed or printed name of registered ager	t and title if conficable (NOT	É Barietarad	Ager	t signature rec	required when reinstating) DATE
12,		ID DIRECTORS	13.	- Agoi		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	D	☐ DELETE	1.1 TI	TLE		☐ Change ☐ Addition
NAME	SEARCY, STERLING J		1,2 N/	AME		
STREET ADDRESS	2146 5TH AVENUE		1.3 \$1	REET	ADDRESS	
CITY-ST-ZIP	VERO BEACH FL 32960		1.4 Ci	TY-S1	r-ZIP	
TITLE	D	☐ DELETE	2.1 TI	TLE		☐ Change ☐ Addition
NAME	SEARCY, IRENE		2.2 N	AME		
STREET ADDRESS	2146 5TH AVENUE		2.3 S1	TREET	ADDRESS	
CITY-ST-ZIP	VERO BEACH FL 32960 2.44		TY-S	T-ZIP		
TITLE		DELETE	3.1 Tr	TLE	-	Change : Addition
NAME			3.2 N/	AME		
STREET ADDRESS			3.3 \$7	TREET	ADDRESS	
CITY-ST-ZIP			_		T-ZIP	Change TAUS:
TITLE		☐ DELETE	4.1 TF			☐ Change ☐ Addition
NAME			4. 2 N			
STREET ADDRESS	· ·				ADDRESS	1
City-St-ZIP	· · · · · · · · · · · · · · · · · · ·	□ 851575		TY-S	T-ZIP	Change Addition
TITLE		☐ DELETE	5.1 TI 5.2 N			
NAME					ADDRESS	
STREET ADDRESS						1
CITY-ST-ZIP		DELETE	5.4 CI	TY-S	1-ZIF	☐ Change ☐ Addition
TITLE			6.2 N			
NAME					ADDRESS	
STREET ADDRESS	A She with				- 1	·
CITY-ST-ZIP ''	A Committee of the Comm		64 C	TY-S	1-212	

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 atjachment with an apprecia, with all other like empowered.

SIGNATURE:

4-25-99 (561)562-3146