FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

PROFIT CORPORATION ANNUAL REPORT 1996

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

DOCUMENT # P95000092697 (8)

1. Corporation Name

~~INVESTMENT SOCIETY, INC.~~ ISI INVESTMENT SERVICES, INC.

N/C 2-13-96
SG

Principal Place of Business

255 SOUTH ORANGE AVE.
SUITE 950
ORLANDO FL 32801

Mailing Address

255 SOUTH ORANGE AVE.
SUITE 950
ORLANDO FL 32801

3. Date Incorporated or Qualified: 12/05/1995

3a. Date of Last Report:

4. FEI Number: 59-3349842 — 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 20 N. ORANGE AVENUE
Suite, Apt. #, etc.
22 SUITE 610
City & State
23 ORLANDO, FLORIDA
Zip 24 32801 Country 25 ORANGE

2a. Mailing Address

26 20 N. ORANGE AVENUE
Suite, Apt. #, etc.
27 SUITE 610
City & State
28 ORLANDO, FLORIDA
Zip 29 32801 Country 30 ~~ORANGE~~

9. Name and Address of Current Registered Agent

NELSON, FRANK J JR.
255 SOUTH ORANGE AVE.
SUITE 950
ORLANDO FL 32801

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable) 20 N. ORANGE AVENUE
83 SUITE 610
84 City ORLANDO FL 85 Zip Code 32801

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 ______ DATE ______

12. OFFICERS AND DIRECTORS		
TITLE	D	☐ DELETE
NAME	NELSON, FRANK J JR.	
STREET ADDRESS	255 SOUTH ORANGE AVE., SUITE 950	
CITY-ST-ZIP	ORLANDO FL 32801	
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		
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
1.1 TITLE	P/D	☒ Change ☐ Addition
1.2 NAME		
1.3 STREET ADDRESS	20 N. ORANGE AVENUE SUITE 610	
1.4 CITY-ST-ZIP	ORLANDO, FLORIDA 32801	
2.1 TITLE	S	☐ Change ☒ Addition
2.2 NAME	BRENT J. SUMMERSGILL	
2.3 STREET ADDRESS	20 N. ORANGE AVENUE SUITE 610	
2.4 CITY-ST-ZIP	ORLANDO, FLORIDA 32801	
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		

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***225.00

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 119.07(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: Brent J. Summersgill BRENT J. SUMMERSGILL — 5/2/96 — (407) 843-1657
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

SG 5-15-96

CR2E034 (12/95)