

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P96000071120

1. Entity Name

NATIONAL INFORMATION SERVICES GROUP, INC.

FILED
Apr 25, 2000 8:00 am
Secretary of State

04-25-2000 90086 039 ***150.00

Principal Place of Business

Mailing Address

1382 TORREYA CIRCLE
NORTH FORT MYERS FL 33917

POST OFFICE BOX 4084
NORTH FORT MYERS FL 33918-4084

2. Principal Place of Business

700 Estero Blvd

3. Mailing Address

700 Estero Blvd

Suite, Apt. #, etc.

Suite, Apt. #, etc.

Fort Myers Beach

Fort Myers Beach

City & State

City & State

Florida

Florida

Zip

Country

Zip

Country

33931

Lee

33931

LEE



DO NOT WRITE IN THIS SPACE

4. FEI Number

65-0690316

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

AMERILAWYER CHARTERED
343 ALMERIA AVENUE
CORAL GABLES FL 33134

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.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so.
(See criteria on back) ☐

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2000 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be Added to Fees

11. OFFICERS AND DIRECTORS

TITLE PD
NAME HEIDER, ANNE
STREET ADDRESS 1382 TORREYA CIRCLE
CITY-ST-ZIP NORTH FORT MYERS FL 33917 ☒ Delete

TITLE STD
NAME DERAMO, Nanci
STREET ADDRESS 1382 TORREYA CIRCLE
CITY-ST-ZIP NORTH FORT MYERS FL 33917 ☐ Delete

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

12. PD ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE PD
NAME Suzanne Deramo
STREET ADDRESS 700 Estero Blvd.
CITY-ST-ZIP Fort Myers Beach, FL 33931 ☐ Change ☒ Addition

TITLE STD
NAME Nanci Deramo
STREET ADDRESS 1920 BRIAR CREEK PLACE
CITY-ST-ZIP SARASOTA, FL 34234 ☒ Change ☐ Addition

TITLE VD
NAME Lennie Buchanan
STREET ADDRESS 700 Estero Blvd
CITY-ST-ZIP Fort Myers Beach, FL 33931 ☐ Change ☒ Addition

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

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

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

13. 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 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

3/13/00 941-463-6995

CR2E034 (9/99)