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

PROFIT CORPORATION ANNUAL REPORT

1999

INSIGHTFUL SOLUTIONS, INC.



DOCUMENT # **P97000086536**1. Corporation Name

FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State

DIVISION OF CORPORATIONS

Apr 26, 1999 8:00 am Secretary of State

04-26-1999 90190 045 ***150.00

(80) ## #				
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Principal Place	e of Business	Mailing Address				1 15 DILL DI 110 18111 18061 QUELL 41	U)((#913) DU(#	16110 01181 01190	1111 8 8 111 1 8 9 1
1012 2ND ST 10		1012 2ND ST. NEPTUNE BEACH FL 32263-50	1012 2ND ST. NEPTUNE BEACH FL 32265-5010			DO NOT WR	ITE IN THIS	SPACE	
						 Date Incorporated or Qualifed 10/07/1997 			
2. Principal Pl	lace of Business	2a. Mailing Address				4. FEI Number		Ap	pled For
	econd Street	26 524 Secono	154	reot		59-347 <u>57</u> 16		No	t Applicable
Suite, Act.		Suite, Apt. #, etc.	<u> </u>					\$8.75	Additional
22		27				5. Certificate of Status Desired		Fee Re	quired
City & State	e	City & State				6. Election Campaign Financing		\$5.00	Vay Be
23 Nepte		28 Newterne (20	uah	FL		Trust Fund Contribution		Added t	o Fees
Zip	Country	Zip	Coun			8. This co poration owes the cur	rent year In		-1
24 322.6	06-5104 25 Duvae	29 52266-5104 30		<u> Lwink</u>		Personal Property Tax.		Yes	MO
	9. Name and Address of Current	Registered Agent				10. Name and Address of New	Registered	Agent	
nco	EDC CINDY			81 Name	•				
	ERS, CINDY			82 Street	t Ad Iress	(P.O. Box Number is Not Accept	able)		
	SECOND STREET		L			<u> </u>			
NEP	TUNE BEACH FL 32266		- 1	83					
			-	84 City				85 Zip (Code
							<u> </u>	- '_	
office or re	to the provisions of Sections 607.0502 egistered agent, or both, in the State o m familiar with, and accept the obligati	िFlorida. Such change was auth	orized	by the corp	d co pora poration's	tion submits this statement for the board of directors. I hereby acce	ept the appo	f changing its intment as re	registered gistered
		U. Rogers		Fin	68		4121	199	
SIGNATURE	Signature, typed oriprinted nar re of registered agent		gistered A	gent signature	required wh	en (einstating)	DATE	-\ 	
12.	OFFICERS AND		13.			ADDITIC NS/CHANGES TO OF	FICERS / J		
TITLE	P	☐ DELETE	1,1 TITL	E.	Pre	sident.		Change	☐ Addition
NAME	RODGERS, CINDY		1.2 NAM	Æ	Ro	zers, Cindy			Ì
STREET ADDRESS	1012 SECOND STREET		13 STR	EET ADDRESS	5 6	ty Second' Stre	et_	- 1 -	,
CITY-ST-ZIP	NEPTUNE BEACH FL 32266		1.4 CIT	Y-ST-ZIP	1/0	ptuny Boach, F	<u>ს პაგ</u>	3.00	
TITLE		☐ DELETE	2.1 TITL	.E		-		Change	☐ Addition
NAMÉ			2.2 NAM	Æ					
STREET ADDRESS			2.3 STF	REET ADDRESS	s				
CITY-ST-ZIP			2. 4 CIT	Y-ST-ZIP					
TITLE		☐ DELETE	3.1 TITL	.E				Change	☐ Addition
NAME			3.2 NA	ME					
STREET ADDRESS			3.3 STR	EET ADDRESS	s				
CITY-ST-ZIP			3.4. CIT	Y-ST-ZIP	<u></u>				
TITLE		☐ DELETE	4.1 TITL	.E	1			Change	☐ Addition
NAME			4 2 NA	ME					
STREET ADDRESS			4 3 STF	REET ADDRESS	s				
CITY-ST-ZIP			4.4 CIT	Y-ST-ZIP	<u> </u>				
TITLE		☐ DELETE	5.1 TIT	.E				Change	☐ Addition
NAME			5.2 NA	ΜE					
STREET ADDRESS			5.3 STF	REET ADDRESS	s				
CITY-ST-ZIP			5.4 CIT	Y-ST-ZIP	<u> </u>				
TITLE		☐ DELETE	6.1 TITI	.E				Change	☐ Addition
NAME			6.2 NA	ΜE					
STREET ADDRESS			6.3 STF	REET ADDRESS	s[
CiTY-ST-ZiP			6.4 CIT	Y-ST-ZIP					

CITY-ST-ZIP 14. I herety 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 suppliemental 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 "2 or Block 13 if changes, or on an attactment with an address, with all other like empowered.

SIGNATURE:

CR2E034 (11/98)