

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P97000101736

1. Entity Name

INDUSTRY INFORMATION SERVICES, INC.

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

04-25-2000 90046 037 ***150.00

Principal Place of Business

Mailing Address

5104 N ORANGE BLOSSOM TRIAL
#205
ORLANDO FL 32810
US

5104 ORANGE BLOSSOM TRIAL
#205
ORLANDO FL 32810-1016
US

2. Principal Place of Business

3. Mailing Address

5104 N Orange Blossom Trail

5104 N Orange Blossom Trail

Suite, Apt. #, etc.

Suite, Apt. #, etc.

205

205

City & State

City & State

Orlando, Florida

Orlando, Florida

Zip

Country

Zip

Country

32810

US

32810

US



DO NOT WRITE IN THIS SPACE

4. FEI Number

59-3479655

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

BRENNAN, PEGGY
5104 N ORANGE BLOSSOM TRAIL
STE 205
ORLANDO FL 32819

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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE PD
NAME MCKINNON, CHERYL L
STREET ADDRESS 259 CHURCHILL DRIVE
CITY-ST-ZIP LONGWOOD FL 32779 ☐ Delete

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

TITLE VD
NAME BRENNAN, PEGGY L
STREET ADDRESS 7736 HIGH PINE
CITY-ST-ZIP ORLANDO FL 32819 ☒ Delete

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

TITLE CFO
NAME BRENNAN, PEGGY L
STREET ADDRESS 7736 HIGH PINE
CITY-ST-ZIP ORLANDO FL 32819 ☒ Delete

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

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

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STREET ADDRESS
CITY-ST-ZIP ☐ Delete

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STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

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

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 #

4-19-00 407-532-7314

CR2E034 (9/99)