

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

FILED
May 08, 1999 8:00 am
Secretary of State

05-08-1999 90072 022 ***150.00

DOCUMENT # P98000078094

1. Corporation Name
INETSYS, INC.

Principal Place of Business
2200 LUCIEN WAY #195
MAITLAND FL 32751

Mailing Address
2200 LUCIEN WAY #195
MAITLAND FL 32751

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

09/09/1998

4. FEI Number

59-3533816

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 owes the current year intangible
Personal Property Tax. ☐ Yes ☒ No

2. Principal Place of Business

21 7825 BAYMEADOWS WAY

Suite, Apt. #, etc.

22 SUITE 106A

City & State

23 JACKSONVILLE, FL

Zip

24 32256

Country

25 USA

2a. Mailing Address

26 7825 BAYMEADOWS WAY

Suite, Apt. #, etc.

27 SUITE 106A

City & State

28 JACKSONVILLE, FL

Zip

29 32256

Country

30 USA

9. Name and Address of Current Registered Agent

HARRIS, JAMES L
2200 LUCIEN WAY #195
MAITLAND FL 32751

10. Name and Address of New Registered Agent

81 Name

ERIC TEWEY

82 Street Address (P.O. Box Number is Not Acceptable)

7825 BAYMEADOWS WAY

83 SUITE 106A

84 City

JACKSONVILLE

FL

85 Zip Code

32256

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

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

ERIC L. TEWEY

(NOTE: Registered Agent signature required when reinstating)

DATE

4/30/99

12. OFFICERS AND DIRECTORS

TITLE D ☐ DELETE
NAME SHEALY, JOHN
STREET ADDRESS 2200 LUCIEN WAY #195
CITY-ST-ZIP MAITLAND FL 32751

TITLE D ☒ DELETE
NAME HARRIS, JAMES L
STREET ADDRESS 2200 LUCIEN WAY #195
CITY-ST-ZIP MAITLAND FL 32751

TITLE D ☐ DELETE
NAME TEWEY, ERIC
STREET ADDRESS 2200 LUCIEN WAY #195
CITY-ST-ZIP MAITLAND FL 32751

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 ☐ Change ☐ Addition
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP

2.1 TITLE ☐ Change ☐ Addition
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

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

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 attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

ERIC L. TEWEY

4/30/99

Date

904-739-7556

Daytime Phone #

CR2E034 (11/98)

0074578