

2001 UNIFORM BUSINESS REPORT (UBR)

FILED

Apr 24, 2001 8:00 am
Secretary of State

04-24-2001 90060 007 ***150.00

DOCUMENT # P98000081882

1. Entity Name
ISLAND COMPUTER SERVICES, INC.

Principal Place of Business

18125 US HWY 41 STE 107
LUTZ FL 33549

Mailing Address

18125 US HWY 41 STE 107
LUTZ FL 33549

2. Principal Place of Business

1933 Brainerd Ct

Suite, Apt. #, etc.

3. Mailing Address

1933 Brainerd Ct

Suite, Apt. #, etc.

City & State

Lutz FL

City & State

Lutz FL

Zip

33549

Country

USA

Zip

33549

Country

USA

4. FEI Number

59-3534337

Applied For

Not Applicable

5. Certificate of Status Desired

☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

ISLES, WILLIAM A JR
18125 US HWY 41 STE 107
LUTZ FL 33549

7. Name and Address of New Registered Agent

Name

William A. Isles Jr.

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

1933 Brainerd Ct

City

Lutz

FL

Zip Code

33549

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 William A. Isles Jr.
Signature, typed or printed name of registered agent and title, if applicable.

(NOTE: Registered Agent signature required when reinstating)

4/17/01
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, 2001 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 ☐ Delete
NAME ISLES, WILLIAM A JR
STREET ADDRESS 18125 US HWY 41 STE 107
CITY-ST-ZIP LUTZ FL 33549

TITLE ☐ Delete
NAME ISLES, MICHELLE M
STREET ADDRESS 18125 US HWY 41 STE 107
CITY-ST-ZIP LUTZ FL 33549

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. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☒ Change ☐ Addition
NAME William A. Isles Jr.
STREET ADDRESS 1933 Brainerd Ct
CITY-ST-ZIP Lutz FL 33549

TITLE ☒ Change ☐ Addition
NAME Michelle M. Isles
STREET ADDRESS 1933 Brainerd Ct
CITY-ST-ZIP Lutz FL 33549

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

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: Michelle M. Isles
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/17/01 813-909-463
Date Daytime Phone #

CR2E034 (10/00)