

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P99000101512

1. Entity Name

INNOVATIVE SOLUTIONS & STRATEGIES, INC.

FILED
Apr 13, 2000 8:00 am
Secretary of State

04-13-2000 90113 015 ***150.00

Principal Place of Business

Mailing Address

8884 GREY HAWK POINT DR.
ORLANDO FL 32836

8884 GREY HAWK POINT DR.
ORLANDO FL 32836-5426

2. Principal Place of Business

3. Mailing Address

8884 Grey Hawk Pt.
Suite, Apt. #, etc.

8884 Grey Hawk Pt.
Suite, Apt. #, etc.

City & State

City & State

Orlando, FL

Orlando, FL

Zip

Country

Zip

Country

32836

USA

32836

USA

4. FEI Number

Applied For

59-3609088

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

RAMHARTER, JOANNE M
8884 GREY HAWK POINT DR.
ORLANDO FL 32836

Name

Joanne M. Ramharter

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

8884 Grey Hawk Pt

City

Orlando

FL

Zip Code

32836

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 Joanne M. Ramharter

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

(NOTE: Registered Agent's Signature required when reinstating)

Joanne M. Ramharter

DATE

4/5/00

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 ☐ Delete
NAME PD
STREET ADDRESS WALSH, DONALD E
CITY-ST-ZIP 8884 GREY HAWK POINT DR.
ORLANDO FL 32836

TITLE ☒ Change ☐ Addition
NAME
STREET ADDRESS 8884 Grey Hawk Point
CITY-ST-ZIP

TITLE ☐ Delete
NAME TD
STREET ADDRESS RAMHARTER, JOANNE M
CITY-ST-ZIP 8884 GREY HAWK POINT DR.
ORLANDO FL 32836

TITLE ☒ Change ☐ Addition
NAME
STREET ADDRESS 8884 Grey Hawk Point
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

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

TITLE ☐ Delete
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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: Donald E. Walsh

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

4/5/00

Daytime Phone #

(863) 420-2621

CR2E034 (9/99)