

2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00611

Entity Name: ISM - FLORIDA GULF COAST, INC.**Current Principal Place of Business:**1130 6TH AVENUE, NE
LARGO, FL 33770**Current Mailing Address:**PO BOX 17708
CLEARWATER, FL 33762 US**FEI Number:** 59-2434365**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**THUE, MELISSA
1130 6TH AVENUE, NE
LARGO, FL 33770 US*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:**_____
Electronic Signature of Registered Agent_____
Date**Officer/Director Detail :**

Title	PRESIDENT
Name	STOCKWELL, MERI
Address	1901 MARLIN DRIVE
City-State-Zip:	BELLEAIR BLUFFS FL 33770

Title	2VP
Name	KILBRIDE, MARY ELLEN 2VP
Address	11399 16TH COURT N. SUITE 200
City-State-Zip:	ST PETERSBURG FL 33716

Title	1ST VP
Name	GEVO, JANE
Address	103 15TH STREET
City-State-Zip:	BELLEAIR BEACH FL 33786

Title	TREASURER
Name	THUE, MELISSA
Address	1130 6TH AVENUE, NE
City-State-Zip:	LARGO FL 33770

Title	SECRETARY
Name	HUMMEL, DIANA
Address	11187 KAPOK GRAND CIRCLE
City-State-Zip:	MADERIA BEACH FL 33708

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: MELISSA THUE**TREASURER****01/12/2014**_____
Electronic Signature of Signing Officer/Director Detail_____
Date