2005 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

COCUMENT # 455281 FIL : 1. Entity Name 05 JUL 15 P.1 12: 27 IAP WORLD SERVICES, INC. Principal Place of Business Mailing Address 7315 N ATLANTIC AVE 7315 N ATLANTIC AVE CAPE CANAVERAL, FL 32920 CAPE CANAVERAL, FL 32920 US US 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 07132005 Cha-P CR2E034 (10/03) Applied For 4. FEI Number City & State City & State 59-1575859 Not Applicable Country Zip Country Zip \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent CT CORPORATION SYSTEM Street Address (P.O. Box Number is Not Acceptable) 1200 S. PINE ISLAND ROAD PLANTATION, FL 33324 City Zip Code FL 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE_ Signature, typed or printed name of registered agent and title if applicable. DATE (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing \$5.00 May Be Amended AR is \$61.25 Trust Fund Contribution. Added to Fees OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. 11. D Change PD ☐ Delete TITLE ■ Addition TITLE NEFFGEN, ALFRED V. NEFFGEN, ALFRED V NAME NAME 7315 N. Atlantic Avenue STREET ADDRESS STREET ADDRESS 7315 N ATLANTIC AVENUE Cape Canaveral, FL 32920 CITY-ST-ZIP CAPE CANAVERAL, FL 32920 CITY-ST-ZIP Addition ASAT ☐ Delete ☐ Change TITLE TITLE SWINDLE, DAVID W. (JR) NAME WALCOTT, JESSE NARAF 2231 Crystal Drive, Suite 1113 STREET ADDRESS 7315 N ATLANTIC AVE STREET ADDRESS CAPE CANAVERAL, FL 32920 CITY-ST-ZIP CITY-ST-ZIP TITLE Delete NAME JENNINGS, JAMES NAME STREET ADDRESS 7315 N ATLANTIC AVE STREET ADDRESS CITY-ST-ZIP CAPE CANAVERAL, FL 32920 CITY-ST-ZIP Delete ☐ Change ☐ Addition TITLE MYERS, DAVID NAME NAME STREET ADDRESS 1550 BAYSIDE DRIVE STREET ADDRESS CITY-ST-ZIP CAPE CANAVERAL, FL 32920 CITY-ST-ZIP ☐ Delete TITLE ☐ Change ☐ Addition TITLE TOOPS, DAVID H NAME NAME 7315 N ATLANTIC AVENUE STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CAPE CANAVERAL, FL 32920 CITY-ST-ZIP Change ☐ Addition ☐ Delete TITLE TITLE KOLLITIDES, GEORGE NAME NAME STREET ADDRESS 299 PARK AVENUE STREET ADDRESS NEW YORK, NY 10171 CITY-ST-7IP CITY-ST-7IP 12. I hereby certify that the information supplied with this filling 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 by execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all of er like empowered 7/12/05 321/784-7392 🔏 ames W. Jennings SIGNATURE. SIGNATURE AND TYPE OF RINTED NAME OF SIGNING OFFICER OR DIRECTOR Treasurer Oaytime Phone