

## New Account Form

### COMPANY INFORMATION

Company Name \_\_\_\_\_  
Street Address \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_  
Phone \_\_\_\_\_ Fax \_\_\_\_\_ Tax I.D. No. \_\_\_\_\_  
E-mail Address \_\_\_\_\_ Web Site \_\_\_\_\_  
Primary Contact \_\_\_\_\_ Phone \_\_\_\_\_  
State of Incorporation \_\_\_\_\_ Date \_\_\_\_\_  
Your stock is listed on the:  NYSE  AMEX  NASDAQ  OTCBB  Other \_\_\_\_\_

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### TRANSFER AGENT INFORMATION

Agent Name \_\_\_\_\_ Contact \_\_\_\_\_  
Phone \_\_\_\_\_ Fax \_\_\_\_\_  
Street Address \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

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### SECURITIES ISSUANCE

Common  Preferred (\_\_\_\_%)  Other \_\_\_\_\_  
Total number of shareholder \_\_\_\_\_ Active \_\_\_\_\_  
Estimated number of certificates issued annually \_\_\_\_\_

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### PROXY SERVICES

Annual Meeting Services  Yes  No  
Location of Meeting \_\_\_\_\_ Anticipated Meeting Date \_\_\_\_\_  
Information Mailings  Yes  No  
Other \_\_\_\_\_

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What other services would you require of Island Stock Transfer?

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Please fax to: 727.289.0069 or email to [info@islandstocktransfer.com](mailto:info@islandstocktransfer.com)