


2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Apr 30, 2007 08:00 A
Secretary of State

DOCUMENT # 708152 1. Entity Name INTERNATIONAL SWIMMING HALL OF FAME, INC.		
Principal Place of Business 1 HALL OF FAME DR. FORT LAUDERDALE FL 33316		Mailing Address 1 HALL OF FAME DR. FORT LAUDERDALE FL 33316
2. Principal Place of Business - No P.O. Box # Suite, Apt. #, etc.	3. Mailing Address Suite, Apt. #, etc.	
City & State		4. FEI Number 59-1087179
Zip	Country	5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required



1st MOORE CR2E037 (10/06)

6. Name and Address of Current Registered Agent WIGO, BRUCE 1 HALL OF FAME DRIVE FORT LAUDERDALE FL 33316	7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code
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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 _____ (NOTE: Registered Agent signature required when re-registering) DATE _____

FILE NOW: FEE IS \$61.25 Due By May 1, 2007	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	Make Check Payable to Florida Department of State
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10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE	D <input type="checkbox"/> Delete SPITZ, MARK 383 DALEHURST AVE. LOS ANGELES CA 90040	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition 000000748560 05/17/07-80073-016 61.25
TITLE	P <input type="checkbox"/> Delete WIGO, BRUCE ONE HALL OF FAME DRIVE FT. LAUDERDALE FL 33316	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE	D <input type="checkbox"/> Delete BAUM, HERB 702 OCEAN JUNO BEACH FL 33408	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE	D <input type="checkbox"/> Delete CAREY, DENNIS 15802 N. 71 STREET #403 SCOTSDALE AZ 85254	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE	D <input type="checkbox"/> Delete DE VARONA, DONNA 3 AVON LANE GREENWICH CT 06830	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE	D <input type="checkbox"/> Delete GODFREY, ELDON 2 VARBOW PLACE NW CALGARY, ALBERTA, CANADA T3A-0-B6	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, 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 617, Florida Statutes, and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered

SIGNATURE: Bruce Wigo Bruce Wigo 4/24/07 954-462-6536

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Distinguishing Phone #