

2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 749128

FILED
Mar 31, 2012
Secretary of State

Entity Name: INTERNATIONAL SHUFFLEBOARD ASSOCIATION, INC.

Current Principal Place of Business:

8245 FOREST CIRCLE
SEMINOLE, FL 33776

New Principal Place of Business:

Current Mailing Address:

8245 FOREST CIRCLE
SEMINOLE, FL 33776

New Mailing Address:

FEI Number: 02-0597868

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ALLEN, BETHANY K
8245 FOREST CIRCLE
SEMINOLE, FL 33776 US

Name and Address of New Registered Agent:

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

OFFICERS AND DIRECTORS:

Title: PD
Name: ZELLNER, MICHAEL R
Address: RUA PROF. ANDREOLI, 57 PQ. SAO LUIZ
City-St-Zip: SAO PAULO, SP CEP 02840 BR

Title: VD
Name: REIHER, IAN
Address: 6/54 MCLEAN ST
City-St-Zip: COOLANGATTA, QL 4225 AU

Title: TD
Name: ALLEN, BETHANY
Address: 8245 FOREST CIRCLE
City-St-Zip: SEMINOLE, FL 33776

Title: VD
Name: BONDI, AUSTIN P
Address: 6634 NORTH LAKE DRIVE
City-St-Zip: ZEPHYRHILLS, FL 33542

Title: VD
Name: HUSSMANN, HEINZ-DIETER
Address: ERLNWEG 1
City-St-Zip: LANGENSELBOLD, HE 63505 DE

Title: VD
Name: PIPHER, GARY
Address: PO BOX 192
City-St-Zip: COLDWATER, ON LOK 1EO CA

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: BETHANY K ALLEN

TD

03/31/2012

Electronic Signature of Signing Officer or Director

Date