

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N39401

FILED  
Sep 01, 2009  
Secretary of State

**Entity Name:** THE INTERNATIONAL IGUANA SOCIETY, INC.

**Current Principal Place of Business:**

24305 S.W. 142 AVENUE  
PRINCETON, FL 33032 US

**New Principal Place of Business:**

**Current Mailing Address:**

5100 POTOMAC DRIVE  
KNOXVILLE, TN 37920 US

**New Mailing Address:**

**FEI Number:** 65-0214222      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired (X)**  
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

**Name and Address of Current Registered Agent:**

BURNAMAN, ROSS  
1447 S. GADSDEN ST.  
TALLAHASSEE, FL 32301 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 ( ) Delete  
Name: WASILEWSKI, JOSEPH  
Address: 24305 S.W. 142 AVE  
City-St-Zip: MIAMI, FL 33032 US

Title: VD ( ) Delete  
Name: BURGESS, JOSEPH  
Address: 853-B ENGLAND STREET  
City-St-Zip: JACKSONVILLE, FL 32227 US

Title: SD ( ) Delete  
Name: GUTMAN, A J  
Address: 133 STEELE RD  
City-St-Zip: W HARTFORD, CT 06119 US

Title: TD ( ) Delete  
Name: ECHTERNACHT, ARTHUR C DR.  
Address: 5100 POTOMAC DRIVE  
City-St-Zip: KNOXVILLE, TN 37920 US

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: ARTHUR C. ECHTERNACHT

TD

09/01/2009

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date