

2013 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 749128

Entity Name: INTERNATIONAL SHUFFLEBOARD ASSOCIATION, INC.**Current Principal Place of Business:**8245 FOREST CIRCLE
SEMINOLE, FL 33776**Current Mailing Address:**8245 FOREST CIRCLE
SEMINOLE, FL 33776**FEI Number:** 02-0597868**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**ALLEN, BETHANY K
8245 FOREST CIRCLE
SEMINOLE, FL 33776 US*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

Officer/Director Detail :

Title PD
Name ZELLNER, MICHAEL R
Address RUA PROF. ANDREOLI, 57 PQ. SAO LUIZ
City-State-Zip: SAO PAULO SP CEP 0-2840

Title TD
Name RUDOLPH, WILMA
Address 7326 STATE ROUTE 19 UNIT 5616
City-State-Zip: MOUNT GILEAD OH 43338

Title VD
Name HUSSMANN, HEINZ-DIETER
Address ERLNWEG 1
City-State-Zip: LANGENSELBOLD HESSE 63505

Title REGISTERED AGENT
Name ALLEN, BETHANY
Address 8245 FOREST CIRCLE
City-State-Zip: SEMINOLE FL 33776

Title VD
Name CROWDER, MALCOLM
Address 25 FIRMIN COURT
City-State-Zip: MERMAID WATERS QUEENSLAND 4218

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

Title VP
Name BILTON, MYRNA
Address 170 PINE RIDGE ROAD RR #1
City-State-Zip: BELWOOD ONTARIO N0B 1J0

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 ALLEN**REGISTERED AGENT****03/16/2013**

Electronic Signature of Signing Officer/Director Detail

Date