2021 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 749128

Entity Name: INTERNATIONAL SHUFFLEBOARD ASSOCIATION, INC.

FILED Apr 13, 2021 **Secretary of State** 2384130566CC

Current Principal Place of Business:

10085 ASHLEY DRIVE SEMINOLE, FL 33772

Current Mailing Address:

10085 ASHLEY DRIVE SEMINOLE, FL 33772 US

FEI Number: 02-0597868 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

ALLEN, BETHANY K 10085 ASHLEY DR SEMINOLE, FL 33772 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:

Address

Electronic Signature of Registered Agent

Date

Officer/Director Detail:

Title DIRECTOR Title DIRECTOR

SKINNER, NANCYE HOUSER, JOHN W Name Name PO BOX 798 Address

601 THIRD ST #154

COOLANGATTA QLD 4225 City-State-Zip: City-State-Zip: **CLARKSTON WA 99403-1911**

Title DIRECTOR Title DIRECTOR

HUSSMANN, HEINZ-DIETER Name Name FLATLAND, HALLVARD B

Address **TONSTRASSE 6** MARIES VEI 38 Address

City-State-Zip: MEERBUSCH 40670 City-State-Zip: 1363 HOVIK

Title **DIRECTOR** Title **DIRECTOR**

Name KAWAI, AKIRA Name BORGES, BERNAR B

Address 1-18-2-501 MINAMI-OTSUKA Address TRAVESSA DR CESAR COUPLE, 19 TOSHIMA-KU

ICARAI

City-State-Zip: TOKYO-TO NITEROI 24220-340 City-State-Zip:

Title **PRESIDENT** Title **TREASURER**

Name BILTON, MYRNA Name ALLEN. BETHANY Address 977 RESTFUL ROAD

Address 10085 ASHLEY DR

City-State-Zip: NORTH FT MYERS FL 33917-6395 SEMINOLE FL 33772 City-State-Zip:

Continues on page 2

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.

04/13/2021 SIGNATURE: BETHANY ALLEN REGISTERED AGENT

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued:

Title SECRETARY

Name ROSETTI, EVELYN

Address 105 4TH ST NE

UNIT 406

City-State-Zip: ST PETERSBURG FL 33701

Title DIRECTOR

Name BRENNAN, KATHY Address 29250 US HWY 19 N

LOT 509

City-State-Zip: CLEARWATER FL 33761

Title DIRECTOR

Name ZELLNER, MICHAEL R

Address 8524 FANTASIA PARKWAY

City-State-Zip: RIVERVIEW FL 33578

Title DIRECTOR
Name DAVIS, PETER

Address HEDDONS HOUSE - HEWITT LN

City-State-Zip: WYMONDHAM, NORFOLK NR18 0JA

Title DIRECTOR
Name CORBEIL, JIM

Address 230 FAIRWAY ROAD
City-State-Zip: WOODSTOCK N4T 1Q3

Title DIRECTOR

Name KRAPPEL, PETER

Address ANASTASIUS GRUN GASSE 43

TOP 2

City-State-Zip: VIENNA 1180