

2022 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 749128

Entity Name: INTERNATIONAL SHUFFLEBOARD ASSOCIATION, INC.**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:**

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title DIRECTOR
Name SKINNER, NANCYE
Address PO BOX 798
City-State-Zip: COOLANGATTA QLD 4225

Title DIRECTOR
Name FLATLAND, HALLVARD B
Address MARIES VEI 38
City-State-Zip: 1363 HOVIK

Title DIRECTOR
Name BORGES, BERNAR B
Address TRAVESSA DR CESAR COUPLE, 19
ICARAI
City-State-Zip: NITEROI 24220-340

Title TREASURER
Name ALLEN, BETHANY
Address 10085 ASHLEY DR
City-State-Zip: SEMINOLE FL 33772

Title DIRECTOR
Name HUSSMANN, HEINZ-DIETER
Address TONSTRASSE 6
City-State-Zip: MEERBUSCH 40670

Title DIRECTOR
Name KAWAI, AKIRA
Address 1-18-2-501 MINAMI-OTSUKA
TOSHIMA-KU
City-State-Zip: TOKYO-TO

Title PRESIDENT
Name BILTON, MYRNA
Address 977 RESTFUL ROAD
City-State-Zip: NORTH FT MYERS FL 33917-6395

Title SECRETARY
Name ROSETTI, EVELYN
Address 105 4TH ST NE
UNIT 406
City-State-Zip: ST PETERSBURG FL 33701

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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****04/12/2022**

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title DIRECTOR
Name DAVIS, PETER
Address HEDDONS HOUSE - HEWITT LN
City-State-Zip: WYMONDHAM, NORFOLK NR18 0JA

Title DIRECTOR
Name LINDSAY, NORMAN
Address 6488 WELLINGTON RD 26
City-State-Zip: BELWOOD ON N0B 1JO

Title DIRECTOR
Name KRAPPEL, PETER
Address ANASTASIUS GRUN GASSE 43
TOP 2
City-State-Zip: VIENNA 1180

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 5824 RIDDLE RD
City-State-Zip: HOLIDAY FL 34690