05131999-90049-037-$150.00-$150.00

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FILED
May 13, 1999 8:00 am
Secretary of State
05-13-1999 90049 037 ***150.00

FILE NOW: FILING FEE AFTER MAY 1ST IS $550.00

PROFIT CORPORATION ANNUAL REPORT 1999

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

560875 - 90075 - 42

DOCUMENT # 718272 (8)

1. Corporation Name
INTERNATIONAL TWIRLING TEACHERS INSTITUTE, INC.

Principal Place of Business
711 E Commercial
Monterey TN 38574

Mailing Address
PO Box 839
Monterey, TN 38574

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified
03/27/1970

4. FEI Number
59-1445644

Applied For
Not Applicable

5. Certificate of Status Desired ☐
$8.75 Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐
$5.00 May Be Added to Fees

8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. ☐ Yes ☐ No

21 Suite, Apt. #, etc.
22 City & State
23 Zip 24 Country

25 Suite, Apt. #, etc.
26 City & State
27 Zip 28 Country

9. Name and Address of Current Registered Agent
Crum, Jack
603 Cumberland Cove Rd
Monterey TN 38574

10. Name and Address of New Registered Agent
29 Name JOHN MILLER
30 Street Address (P.O. Box Number is not acceptable)
2499 Glades Rd #305A
31 City Boca Raton
32 State FL
33 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Ascertainment was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of Section 607.0505, Florida Statutes.

SIGNATURE _____ Date 6-9-99

12. OFFICERS AND DIRECTORS

TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PRD Sasser, Kenneth 4488 Sea Grape Ave Lauderdale By Sea, FL	☐ DELETE
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	STD Crum, Marge 603 Cumberland Cove Rd Monterey TN 38574	☐ DELETE
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VDD Crum, Jack 603 Cumberland Cove Rd Monterey TN 38574	☐ DELETE
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ DELETE
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

13.1 TITLE / 13.2 NAME / 13.3 STREET ADDRESS / 13.4 CITY-ST-ZIP		☐ Change ☐ Addition
14.1 TITLE / 14.2 NAME / 14.3 STREET ADDRESS / 14.4 CITY-ST-ZIP		☐ Change ☐ Addition
15.1 TITLE / 15.2 NAME / 15.3 STREET ADDRESS / 15.4 CITY-ST-ZIP		☐ Change ☐ Addition
16.1 TITLE / 16.2 NAME / 16.3 STREET ADDRESS / 16.4 CITY-ST-ZIP		☐ Change ☐ Addition
17.1 TITLE / 17.2 NAME / 17.3 STREET ADDRESS / 17.4 CITY-ST-ZIP		☐ Change ☐ Addition

CR2E034 (10/97)

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Jack Crum Jack Crum 4-27-99 931-839-7654
SIGNATURE AND TYPED OR PRINTED NAME OF INDIVIDUAL OFFICER OR DIRECTOR — Date — Daytime Phone