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NONPROFIT  
CORPORATION  
ANNUAL REPORT  
1997



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

FILED  
Mar 13 1997 8:00am  
Secretary of State

DOCUMENT # **F94000005455 (0)**

1. Corporation Name

**THE INTERNATIONAL INSTITUTE FOR QUALITY AND ETHICS IN SERVICE AND TOURISM LTD., INC.**

Principal Place of Business

**8742 MISTY CREEK DRIVE  
SARASOTA FL 34241**

Mailing Address

**8742 MISTY CREEK DRIVE  
SARASOTA FL 34241-9561**



3. Date Incorporated or Qualified  
**10/20/1994**

3a. Date of Last Report  
**05/01/1996**

2. Principal Place of Business

21

2a. Mailing Address

26

4. FEI Number

**04-3045352**

Applied For

Not Applicable

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

25

29

30

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 has liability for intangible tax under s. 199.032,  
Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**HALL, STEPHEN S  
8742 MISTY CREEK DRIVE  
SARASOTA FL 34241**

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

**FL**

85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, 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. Such change 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 617.0503, Florida Statutes.

SIGNATURE

Signature typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE **PD** ☐ DELETE

NAME **HALL, STEPHEN S**  
STREET ADDRESS **8742 MISTY CREEK DRIVE**  
CITY-ST-ZIP **SARASOTA FL 34241**

1.1 TITLE ☐ Change ☐ Addition

TITLE **S** ☐ DELETE

NAME **HALL, MARJORIE S**  
STREET ADDRESS **8742 MISTY CREEK DRIVE**  
CITY-ST-ZIP **SARASOTA FL 34241**

1.2 NAME ☐ Change ☐ Addition

TITLE **D** ☐ DELETE

NAME **KEIM, PETER D**  
STREET ADDRESS **7589 CORDOBA CIRCLE**  
CITY-ST-ZIP **NAPLES FL 33942**

1.3 STREET ADDRESS ☒ Change ☐ Addition

TITLE **D** ☐ DELETE

NAME **GUIBILATO, CERARD**  
STREET ADDRESS **AV BERNARD HIRSCH 95021 CERGY-PONTOISE**  
CITY-ST-ZIP **CEDEX FRANCE**

1.4 CITY-ST-ZIP ☐ Change ☐ Addition

TITLE **D** ☐ DELETE

NAME **DERMODY, DONAL A**  
STREET ADDRESS **3301 COLLEGE AVENUE**  
CITY-ST-ZIP **FORT LAUDERDALE FL**

2.1 TITLE ☐ Change ☐ Addition

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

2.2 NAME ☐ Change ☐ Addition

2.3 STREET ADDRESS  
2.4 CITY-ST-ZIP

**D Keim, Peter D.  
916 Egrets Run  
Naples, Florida 33963**

14. I do 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 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

March 3, 1997 941-927-3010

Date

Daytime Phone # 0063847

CR2E037 (9/96)