2000 UNIFORM BUSINESS REPORT (UBR)

changed, or on an attachment with an address, with all other like empowered

FILED Mar 04, 2000 8:00 am Secretary of State DOCUMENT # **F9400005455** 1. Entity Name THE INTERNATIONAL INSTITUTE FOR QUALITY AND ETHI 03-04-2000 90068 032 ****61.25 Principal Place of Business * Mailing Address 8742 MISTY CREEK DRIVE 8742 MISTY CREEK DRIVE SARASOTA FL 34241-9561 SARASOTA FL 34241 DIDOMOTO 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State Applied For City & State 4. FEI Number 04-3045352 Not Applicable Zip Country Country ' \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Street Address (P.O. Box Number is Not Acceptable) HALL, STEPHEN S 8742 MISTY CREEK DRIVE SARASOTA FL 34241 Zip Code 8. 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. STEPHEN S. J. HALL SIGNATURE Signature, typed or printed name of registered agent and title if applicable. FILE NOW: 9. Election Campaign Financing Make Check Payable to \$5.00 May Be Trust Fund Contribution. **Department of State** FEE IS \$61.25 Added to Fees OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. 11. ☐ Addition TITLE TITLE Delete GOODMAN, RAY NAME NAME STREET ADDRESS STREET ADDRESS P.O. BOX 898 CITY-ST-ZIP CITY-ST-ZIP **DURHAM NH 03824** ☐ Addition Change ☐ Delete TITLE TITLE HALL MARJORIE S NAME NAME STREET ADDRESS STREET ADDRESS 8742 MISTY CREEK DRIVE CITY-ST-ZIP CITY-ST-ZIP SARASOTA FL-34241 Change ☐ Addition TITLE ☐ Delete TITLE KEIM, PETER. D Keim. Peter D NAME NAME 2085 BEACON HILL WAY STREET ADDRESS STREET ADDRESS 159 SAN RAFAEL AVENUE ALPHA RETTA, GA 30005 CITY-ST-ZIP CITY-ST-ZIP NAPLES FL ☐ Change ☐ Addition TITLE D ☐ Delete TITLE GUIBILATO, CERARD NAME NAME STREET ADDRESS AV BERNARD HIRSCH 95021 CERGY-PONTOISE STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP **CEDEX FRANCE** ☐ Change Delete TITLE ☐ Addition **BUCHANAN P.H.D., POLLY** NAME STREET ADDRESS 2064 ROOSEVELT HALL STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP YPSILANTI MI 48197 □ Delete ☐ Change ☐ Addition HALL, STEPHENS. 8742 MISTY CREEK NAME NAME STREET ADDRESS STREET ADDRESS SARASOTA, F/34241 CITY-ST-ZIP CITY-ST-ZIP 12. I hereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental 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 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 10 or Block 11 if