

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # F94000005455

1. Entity Name

THE INTERNATIONAL INSTITUTE FOR QUALITY AND ETHI

FILED
Mar 19, 2001 8:00 am
Secretary of State

03-19-2001 90488 017 ****61.25

Principal Place of Business

~~8742 MISTY CREEK DRIVE~~ *8755 Misty Creek*
SARASOTA FL 34241

Mailing Address

~~8742 MISTY CREEK DRIVE~~ *8755 Misty Creek*
SARASOTA FL 34241

00035187



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

8755 Misty Creek Dr.

Suite, Apt. #, etc.

Sarasota FL

City & State

34241

Zip

Country

3. Mailing Address

8755 Misty Creek Dr.

Suite, Apt. #, etc.

Sarasota, FL

City & State

34241

Zip

Country

4. FEI Number

04-3045352

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

HALL, STEPHEN S

~~8742 MISTY CREEK DRIVE~~ *8755 Misty Creek Dr.*

SARASOTA FL 34241

7. Name and Address of New Registered Agent

Name

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

8755 MISTY CREEK DRIVE

Sarasota

City

FL

Zip Code

34241

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.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW:
FEE IS \$61.25

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make Check Payable to
Department of State

10. OFFICERS AND DIRECTORS

TITLE ☐ Delete
NAME **D**
STREET ADDRESS **GOODMAN, RAY**
CITY-ST-ZIP **P.O. BOX 898**
DURHAM NH 03824

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

TITLE ☐ Delete
NAME **D**
STREET ADDRESS **KEIM, PETER D**
CITY-ST-ZIP **2085 BEACON HILL WAY**
ALPHARETTA GA 30005

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

TITLE ☐ Delete
NAME **D**
STREET ADDRESS **BUCHANAN P.H.D., POLLY**
CITY-ST-ZIP **2064 ROOSEVELT HALL**
YPSILANTI MI 48197

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☒ Change ☐ Addition
NAME *Hall, Marjorie S.*
STREET ADDRESS *8755 Misty Creek Dr.*
CITY-ST-ZIP *Sarasota, FL 34241*

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. 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 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 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Signature Required

3/17/01

94-926-8755

CR2E037 (10/00)