

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F94000005455

FILED  
Mar 31, 2009  
Secretary of State

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

**Current Principal Place of Business:**

8755 MISTY CREEK DRIVE  
SARASOTA, FL 34241

**New Principal Place of Business:**

**Current Mailing Address:**

8755 MISTY CREEK DRIVE  
SARASOTA, FL 34241

**New Mailing Address:**

**FEI Number:** 04-3045352      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

HALL, STEPHEN S  
8755 MISTY CREEK DRIVE  
SARASOTA, FL 34241 US

**Name and Address of New Registered Agent:**

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

**OFFICERS AND DIRECTORS:**

Title: D ( ) Delete  
Name: GOODMAN, RAY  
Address: P.O. BOX 898  
City-St-Zip: DURHAM, NH 03824

Title: S ( ) Delete  
Name: HALL, MARJORIE S  
Address: 8755 MISTY CREEK DRIVE  
City-St-Zip: SARASOTA, FL 34241

Title: D ( ) Delete  
Name: KEIM, PETER D  
Address: 2085 BEACON HILL WAY  
City-St-Zip: ALPHARETTA, GA 30005

Title: D ( ) Delete  
Name: GUIBILATO, CERARD  
Address: AV BERNARD HIRSCH 95021 CERGY-PONTOISE  
City-St-Zip: CEDEX FRANCE,

Title: D ( ) Delete  
Name: BUCHANAN P.H.D., POLLY  
Address: 2064 ROOSEVELT HALL  
City-St-Zip: YPSILANTI, MI 48197

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: MARJORIE S. HALL

OFF

03/31/2009

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date