

# 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F97000006840

FILED  
May 02, 2005  
Secretary of State

**Entity Name:** INTERNATIONAL MARINA INSTITUTE, CORPORATION

**Current Principal Place of Business:**

725 N A1A  
C-110  
JUPITER, FL 33477

**New Principal Place of Business:**

444 N CAPITOL ST NW  
SUITE 645  
WASHINGTON, DC 20001 15

**Current Mailing Address:**

P.O. BOX 7197  
JUPITER, FL 33468 US

**New Mailing Address:**

444 N CAPITOL ST NW  
SUITE 645  
WASHINGTON, DC 20001 15

**FEI Number:** 22-2761173 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**  
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

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

TIMPSON, WALTER K JR  
16761 130TH WAY N  
JUPITER, FL 33478 US

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

SANDOVAL, GLENDA  
200 EAST RANDOLPH DRIVE  
SUITE 5100  
CHICAGO, IL, FL 60601 US

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: GLENDA SANDOVAL

05/02/2005

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: S ( ) Delete  
Name: LAIDLAW, ALEX  
Address: 6700 HOLIDAY RD.  
City-St-Zip: BUFORD, GA 30518

Title: D ( ) Delete  
Name: YEARGIN, WILLIAM  
Address: 4200 POINSETTIA AVE.  
City-St-Zip: WEST PALM BEACH, FL 33407

Title: P ( ) Delete  
Name: KENNEY, GREGG  
Address: 14755 PRESTON RD., SUITE 520  
City-St-Zip: DALLAS, TX 75254

Title: D (X) Delete  
Name: NIXON, DENNIS  
Address: UNICERSITY OF RHODE ISLAND  
City-St-Zip: KINGSTON, RI 02881

Title: VP (X) Delete  
Name: BEACHEM, DOUGLAS  
Address: OUTLOOKHOUSE, SCHOOL LANE  
City-St-Zip: HAMBLE, HANTS UK, S0314NB

Title: T (X) Delete  
Name: STURNER, ANDREW  
Address: 2890 NE 187TH ST.  
City-St-Zip: AVENTURA, FL 33180

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

Title: P (X) Change ( ) Addition  
Name: FRYE, JAMES  
Address: 444 N CAPITOL ST NW, STE 645  
City-St-Zip: WASHINGTON, DC 20001 15

Title: T (X) Change ( ) Addition  
Name: LAIDLAW, ALEX  
Address: 6900 HOLIDAY RD  
City-St-Zip: BUFORD, GA 30518 15

Title: T (X) Change ( ) Addition  
Name: ANDERSON, BILL  
Address: 1663 VENTURA BLVD  
City-St-Zip: ENCINO, CA 91436 15

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 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 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: JAMES FRYE

P

05/02/2005

Electronic Signature of Signing Officer or Director

Date