

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED
Mar 30, 2005
Secretary of State**

DOCUMENT# N00000002153

Entity Name: INTERNATIONAL INDEPENDENT SHOWMEN'S MUSEUM CORPORATION

Current Principal Place of Business:

6915 RIVERVIEW DRIVE
RIVERVIEW, FL 33569

New Principal Place of Business:

Current Mailing Address:

PO BOX 188
GIBSONTON, FL 33534

New Mailing Address:

FEI Number: 59-3658955 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

MCEWEN, DAVID B
100 FIRST AVENUE SOUTH, STE 340
ST. PETERSBURG, FL 33701 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: PD () Delete
Name: CARLTON, LARRY J
Address: 6915 RIVERVIEW DR
City-St-Zip: RIVERVIEW, FL 33569

Title: VD () Delete
Name: HOSKINS, PHILLIP
Address: 6915 RIVERVIEW DR.
City-St-Zip: RIVERVIEW, FL 33569

Title: SD () Delete
Name: BREWER, PATRICIA
Address: 6915 RIVERVIEW DR
City-St-Zip: RIVERVIEW, FL 33569

Title: TD () Delete
Name: LARKEE, BARBARA
Address: 6915 RIVERVIEW DR.
City-St-Zip: RIVERVIEW, FL 33569

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: ARNOLD, IVAN R
Address: 6915 RIVERVIEW DR
City-St-Zip: RIVERVIEW, FL 33569

Title: VD (X) Change () Addition
Name: IANNI, STEVE
Address: 6915 RIVERVIEW DR.
City-St-Zip: RIVERVIEW, FL 33569

Title: SD (X) Change () Addition
Name: ARNOLD, KAREN
Address: 6915 RIVERVIEW DR
City-St-Zip: RIVERVIEW, FL 33569

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: KAREN ARNOLD

SD

03/30/2005

Electronic Signature of Signing Officer or Director

Date