

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000009683

FILED  
Apr 27, 2009  
Secretary of State

**Entity Name:** INTERNATIONAL SWIM INSTRUCTORS ASSOCIATION, INC.

**Current Principal Place of Business:**

9800 NW 11TH STREET  
PLANTATION, FL 33322

**New Principal Place of Business:**

**Current Mailing Address:**

9800 NW 11TH STREET  
PLANTATION, FL 33322

**New Mailing Address:**

**FEI Number:** 26-1197730

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

BURGESS, MICHAEL C  
9800 NW 11TH STREET  
PLANTATION, FL 33322 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: P ( ) Delete  
Name: BURGESS, DARRELL D MD  
Address: 431 NW 130TH AVEEET  
City-St-Zip: PLANTATION, FL 33325

Title: T ( ) Delete  
Name: BURGESS, MICHAEL C  
Address: 9800 NW 11TH STREET  
City-St-Zip: PLANTATION, FL 33322

Title: S ( ) Delete  
Name: KING, KAREN  
Address: 744 RIVERSIDE DR  
City-St-Zip: CORAL SPRINGS, FL 33071

**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:

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: MICHAEL BURGESS

T

04/27/2009

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

\_\_\_\_\_  
Date