

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N12044

FILED
Sep 01, 2005
Secretary of State

Entity Name: INTERNATIONAL SPORTS COALITION, INC.

Current Principal Place of Business:

6900 S GRAY ROAD
INDIANAPOLIS, IN 46237 US

New Principal Place of Business:

Current Mailing Address:

6900 S GRAY ROAD
INDIANAPOLIS, IN 46237 US

New Mailing Address:

FEI Number: 59-2681356 **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:

Name and Address of New Registered Agent:

WEST, PAUL S ESQ
600 S. ORLANDO AVE
SUITE 301
MAITLAND, FL 32751 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: _____

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: CD () Delete
Name: CARSTEN, CASSIE
Address: 1/1 BANGNOEK ROAD
City-St-Zip: STELLENBOSCH 7600, SF

Title: PD () Delete
Name: WILLSON, DAVID
Address: 20 ALKARINGA ROAD
City-St-Zip: YOWIE BAY NSW 2228, AS

Title: SD () Delete
Name: WOZNAK, MICHAEL
Address: 3000 KRAFT AVE SE
City-St-Zip: GRAND RAPIDS, MI 49501

Title: TD () Delete
Name: JACKSON, KYLE
Address: 2600 N 23RD ROAD
City-St-Zip: ARLINGTON, VA 22207

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:

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: MICHAEL WOZNAK

SD

09/01/2005

Electronic Signature of Signing Officer or Director

Date