

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N19721

FILED
Apr 06, 2004
Secretary of State

Entity Name: THE INTERNATIONAL AFFILIATION OF INDEPENDENT ACCOUNTING FIRMS' EDUCATIONAL FOUNDATION, INC.

Current Principal Place of Business:

C/O ARTHUR GOESSEL
9200 S. DADELAND BLVD, #510
MIAMI, FL 33156

New Principal Place of Business:

Current Mailing Address:

C/O ARTHUR GOESSEL
9200 S. DADELAND BLVD, #510
MIAMI, FL 33156

New Mailing Address:

FEI Number: 59-2963925 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

GOESSEL, ARTHUR
9200 S. DADELAND BLVD, #510
MIAMI, FL 33156

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: FALLS, BOYD P
Address: 114 W BLAND ST
City-St-Zip: CHARLOTTE, NC 28203

Title: D () Delete
Name: MCPHARLIN, HUGH
Address: GPO BOX 2163, FELIX BOIX, ENGREPLANTA
City-St-Zip: ADELAIDE, S.

Title: D () Delete
Name: ROHNER, MARYANN
Address: STAMPFENBACHSTRASSE 153, CH-8035
City-St-Zip: ZURICH, SW

Title: D () Delete
Name: GOESSEL, ARTHUR D.
Address: 9200 S. DADELAND BLVD., SUITE 510
City-St-Zip: MIAMI, FL 33156

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: ARTHUR D. GOESSEL

D

04/06/2004

Electronic Signature of Signing Officer or Director

Date