2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# N21116

FILED Apr 23, 2002 8:00 AM Secretary of State

Entity Name: INTERNATIONAL SENIORS AMATEUR GOLF SOCIETY, INC.

Current Pr	rincipal Place o	f Business:	New Principal Place	New Principal Place of Business:	
4 ELMWOO ASHVILE, 1	OD LANE NC 28803 US	3	4 ELMWOOD LANE ASHEVILLE, NC 288	03 US	
Current Mailing Address:			New Mailing Addres	New Mailing Address:	
4 ELMWOO ASHEVILLE		US			
El Number:	59-2803351	FEI Number Applied For()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and	Address of Cu	rrent Registered Agent:	Name and Address	Name and Address of New Registered Agent:	
THORNTON, JOHN 19485 -40TH AVE N. MIAMI BCH, FL 33160			THORNTON, JOHN 19410 40TH COURT SUNNY ISLES, FL 33		
	named entity sul of Florida.	omits this statement for the pur	pose of changing its registere	ed office or registered agent, or both,	
SIGNATUR				04/23/2002	
	Electronic	Signature of Registered Agent		Date	
OFFICERS AND DIRECTORS:			ADDITIONS/CHANG	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Fitle: Name: Address: City-St-Zip:	VP () DOMEHEN, TOM 2831 E HIGHLAND SCOTTSDALE, AZ)	Title: Name: Address: City-St-Zip:	() Change () Addition	
Fitle: Name: Address: Dity-St-Zip:	P () D J. GRANT WALLA 2175 DOUGLASB, CALGARY, AB	CE,	Title: Name: Address: City-St-Zip:	() Change () Addition	
Fitle: Name: Address: City-St-Zip:	D () D JONES, BARRY 1341 WRENFIELD VILLANOVA, PA		Title: Name: Address: City-St-Zip:	() Change () Addition	
Fitle: Name: Address: City-St-Zip:	T () Do MORRISON, JAMI 124 SILVERMIST LITTLE SILVER, N	ES CT	Title: Name: Address: City-St-Zip:	() Change () Addition	
Fitle: Name: Address: City-St-Zip:	D () DO ROSS, OBLEY 802 SLASH PINE NAPLES, FL		Title: Name: Address: City-St-Zip:	() Change () Addition	
Fitle: Name: Address: City-St-Zip:	ED () DO THORNTON, JOHI 4 ELMWOOD LAN ASHEVILLE, NC 2	IE	Title: Name: Address: City-St-Zip:	() Change () Addition	

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: JOHN THORNTON ED 04/23/2002