2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 17, 2007
Secretary of State

DOCUMENT# N21116

Entity Name: INTERNATIONAL SENIORS AMATEUR GOLF SOCIETY, INC.

Current Principal Place of Business:

14 YORK TERRACE
OSTERVILLE, MA 02655 US

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 5001
OSTERVILLE, MA 02655 US

New Mailing Address:

FEI Number: 59-2803351 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

DECKLER, KENNETH
19410 40TH COURT
SUNNY ISLES, FL 33160 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:	MEHEN, TOM	
Address:	2831 E HIGHLAND	
City-St-Zip:	SCOTTSDALE, AZ 85251	
Title:	VP	( ) Delete
Name:	BRATTON, JACK	
Address:	46-850 AMIR	
City-St-Zip:	PALM DESERT, CA 92260	
Title:	D	( ) Delete
Name:	JONES, BARRY	
Address:	1341 WRENFIELD WAY	
City-St-Zip:	VILLANOVA, PA	
Title:	T	( ) Delete
Name:	MORRISON, JAMES	
Address:	124 SILVERMIST CT	
City-St-Zip:	LITTLE SILVER, NJ 07739	
Title:	D	( ) Delete
Name:	ROSS, OBLEY	
Address:	802 SLASH PINE COURT	
City-St-Zip:	NAPLES, FL	
Title:	CD	( ) Delete
Name:	DUHAMEL, ALEX	
Address:	14 YORK TERRACE	
City-St-Zip:	OSTERVILLE, MA 02655	

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:	
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 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: ALEX DUHAMEL CD 04/17/2007
Electronic Signature of Signing Officer or Director — Date