## 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N34909

FILED Mar 21, 2005 Secretary of State

Entity Name: THE INTERNATIONAL GAME FISH ASSOCIATION ENDOWMENT, INC.

Current Principal Place of Business:			New Principal Plac	New Principal Place of Business:	
300 GULFS DANIA, FL	STREAM WAY 33004 US				
Current Mailing Address:			New Mailing Addre	New Mailing Address:	
300 GULFSTREAM WAY DANIA, FL 33004 US					
FEI Number:	65-0175847	FEI Number Applied For()	FEI Number Not Applicable ( )	Certificate of Status Desired (X)	
Name and Address of Current Registered Agent: Name and Address of New Registered Agent:					
COLBURN, HARRY S., JR. 125 WORTH AVE STE 202 PALM BCH, FL 33480 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.					
SIGNATUR					
		nic Signature of Registered Age	nt	Date	
OFFICERS AND DIRECTORS:			ADDITIONS/CHANG	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	KRAMER, ROB	EN ST APT 208	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	T ( ) ANDERSON, JO 423 CHILIAN A' PALM BEACH,	VE	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	T ( ) MATTHEWS, G 417 CHILIAN A' PALM BEACH,	VE	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	CHRISTIANSE	E LEON 701 STE 303	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	BASCO, PAME	SPEEDWAY STE 1510	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: ROB KRAMER PD 03/21/2005