2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N93000004343

FILED Jan 04, 2005 Secretary of State

Entity Name: INTERNATIONAL GAY & LESBIAN TRAVEL ASSOCIATION, INC.

Current Principal Place of Business:

New Principal Place of Business:

4331 N. FEDERAL HIGHWAY #304

FORT LAUDERDALE, FL 33308

Current Mailing Address: New Mailing Address:

4331 N. FEDERAL HIGHWAY #304

FORT LAUDERDALE, FL 33308

FEI Number: 65-0443108 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

WILSON, ROBERT N 4331 N. FEDERAL HIGHWAY #304 FORT LAUDERDALE, FL 33308 US

FORT LAUDERDALE, FL 33306 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:

Flacture of Decision of Decision of Asset

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD () Delete Title: PD (X) Change () Addition
Name: CARTIERI, RON Name: STOKES, ANDREW
Address: 678 N 15TH STREET Address: CHURCHGATE HOUSE 56 OXFORD ST.
City-St-Zip: PHILADELPHIA, PA 19130 City-St-Zip: MANCHESTER, EN M16EU UK

Title: VPD Title: (X) Change () Addition () Delete COREY, GEOFF Name: SKALLERUD, MATTHEW Name: Address: 4520 N AVE #5 Address: 955 NORTH VISTA STREET City-St-Zip: SAN DIEGO, CA 92116 City-St-Zip: LOS ANGELES, CA 90046 US

Title: TD () Delete Title: () Change () Addition

 Name:
 SMITH, STEVE
 Name:

 Address:
 1525 ATLANTIC BLVD
 Address:

 City-St-Zip:
 KEY WEST, FL 33340 US
 City-St-Zip:

Title: SD () Delete Title: SD (X) Change () Addition Name: SKALLERUD, MATT Name: PENTRACK, JILL 4331 N. FEDERAL HWY., STE. 304 Address: 955 NORTH VISTA STREET Address: City-St-Zip: LOS ANGELES, CA 90046 AU City-St-Zip: FORT LAUDERDALE, FL 33308 US

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: ROBERT N. WILSON ED 01/04/2005