2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

changed, or on an attachment with an address, with all other like empowered.

TURE AND TYPED OF PRINTED NAME OF SIGNING

SIGNATURE:

Aug 03, 2006 8:00 am Secretary of State DOCUMENT # N93000004343 08-03-2006 90001 043 ****61.25 INTERNATIONAL GAY & LESBIAN TRAVEL ASSOCIATION, INC. Principal Place of Business Mailing Address 50023958 4331 N. FEDERAL HIGHWAY 4331 N. FEDERAL HIGHWAY #304 #304 FORT LAUDERDALE, FL 33308 FORT LAUDERDALE, FL 33308 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 07112006 Chg-NP CR2E037 (4/06) City & State City & State 4. FEI Number Applied For 65-0443108 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired П Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name TANZELL JOHN WILSON, ROBERT N 4331 N. FEDERAL HIGHWAY #304 FORT LAUDERDALE, FL 33308 **#304** FORT LAUDERDALE 8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE JOHN TANZELLA EXECUTIVE DIRECTOR Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) Filing Fee is \$61.25 9. Election Campaign Financing **\$5.00** May Be Make check payable to Trust Fund Contribution. \Box Florida Department of State Due by September 6, 2006 Added to Fees 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 11 PD TITLE Delete TITLE PD Change Addition SMITH STEVE 1525 ATLANTIC BLVD STOKES, ANDREW NAME NAME STREET ADDRESS CHURCHGATE HOUSE 56 OXFORD ST. STREET ADDRESS MANCHESTER, EN M16EU CITY-ST-ZIP CITY-ST-ZIP KEY WEST, FL 33340 VPD TITLE ☐ Delete TITLE Change ☐ Addition SKALLERUD, MATTHEW NAME NAME 955 NORTH VISTA STREET STREET ADDRESS STREET ADDRESS CITY-ST-ZIP LOS ANGELES, CA 90046 CITY-ST-ZIP TD TITLE Delete TITLE ☐ Change Addition GOJKOVICH, SERGE 1158 HYDE PARK AVE NAME SMITH, STEVE NAME STREET ADDRESS 1525 ATLANTIC BLVD STREET ADDRESS BOSTON, MA. 02136 CITY-ST-ZIP KEY WEST, FL 33340 CITY-ST-ZIP πіε SD ☐ Delete TITLE ☐ Change ■ Addition PENTRACK, JILL NAME NAME STREET ADDRESS 4331 N. FEDERAL HWY., STE. 304 STREET ADDRESS FORT LAUDERDALE, FL 33308 CITY-ST-7IP CITY-ST-7IP TITLE TITLE ☐ Delete ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7/P CITY-ST-7IP TFTLE ☐ Delete TITLE ☐ Change ■ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP 12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if

OFFICER OR DIRECTOR

FILED

Daytime Phone #

Date