

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N95000001516

FILED  
May 01, 2008  
Secretary of State

**Entity Name:** INTERNATIONAL DEVELOPMENT AGENCY, INC.

**Current Principal Place of Business:**

1800 AUSTRALIAN AVE. SOUTH, SUITE 100  
WEST PALM BEACH, FL 33049

**New Principal Place of Business:**

**Current Mailing Address:**

1800 AUSTRALIAN AVE. SOUTH, SUITE 100  
WEST PALM BEACH, FL 33049

**New Mailing Address:**

**FEI Number:** 59-3353000      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**  
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

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

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

SPEER, W. MORGAN  
1800 AUSTRALIAN AVE. SOUTH, SUITE 100  
WEST PALM BEACH, FL 33409 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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: PD ( ) Delete  
Name: KESSLER, DOUGLAS  
Address: 107 WEST MARQUITA  
City-St-Zip: SAN CLEMENTE, CA 92672

Title: VPD ( ) Delete  
Name: MYERS, KENNETH  
Address: 107 WEST MARQUITA  
City-St-Zip: SAN CLEMENTE, CA 92672

Title: STD ( ) Delete  
Name: SHARP, DANIEL  
Address: 107 WEST MARQUITA  
City-St-Zip: SAN CLEMENTE, CA 92672

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: P (X) Change ( ) Addition  
Name: JONES, CHARLES  
Address: 1800 AUSTRALIAN AVENUE SOUTH, STE 100  
City-St-Zip: WEST PALM BEACH, FL 33409

Title: D (X) Change ( ) Addition  
Name: BATES, CRAIG  
Address: 50 ST. THOMAS PLACE  
City-St-Zip: MALVERNE, NY 11565

Title: D (X) Change ( ) Addition  
Name: KESSLER, DOUGLAS  
Address: 107 W. MARQUITA  
City-St-Zip: SAN CLEMENTE, CA 92672

I hereby certify that the information supplied with this filing does not qualify 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: CHARLES JONES

PRES

05/01/2008

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date