

# **2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P15459

**FILED**  
**Apr 11, 2010**  
**Secretary of State**

**Entity Name:** THE INTERNATIONAL SOCIETY OF STRESS ANALYSTS , INC.

**Current Principal Place of Business:**

2609 MILTON AVE  
KISSIMMEE, FL 34741 US

**New Principal Place of Business:**

**Current Mailing Address:**

2609 MILTON AVE  
KISSIMMEE, FL 34741 US

**New Mailing Address:**

**FEI Number:** 23-7304712

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

BRUNETTE, LEO L  
2609 MILTON AVE  
KISSIMMEE, FL 34741 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: PD  
Name: BRUNETTE, LEO L  
Address: PO BOX 590  
City-St-Zip: LACENTER, WA 98629

Title: D  
Name: FULWIDER, JOHN F PH D  
Address: PO BOX 479  
City-St-Zip: AMORY, MS 38821 US

Title: D  
Name: SYLVESTRE, MICHAEL A  
Address: 2609 MILTON AVENUE  
City-St-Zip: KISSIMMEE, FL 34741 US

Title: D  
Name: GUAY, GLENN  
Address: 23 BIRCHWOOD DRIVE  
City-St-Zip: DAYVILLE, CN 06241 US

I hereby 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 all other like empowered.

SIGNATURE: LEO L. BRUNETTE

PD

04/11/2010

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

\_\_\_\_\_  
Date