FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P95000076981 (6)

INTERNATIONAL ASSOCIATION OF SEMINAR PROFESSIONA

Principal Place of Business

452 MORNINGSIDE ROAD VENICE FL 34283

Mailing Address

1532 US 41 BYPASS SOUTH STE 265 VENICE FL 34293

US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

May 07 1998 8:00an
Secretary of State

FILED

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				10/02/1995		
2. Principal Pl	ace of Business	2a. Mailing Address 26 205 BASE	1	4. FEI Number	Applied For	
21 205	BADE HYENUE	26 JU DASE	HVEN	65-0615702	Not Applicable	
Sulte, Apt. 4 22	#, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required	
City & State	VICE, FL	City State 28 VENCE	=L.	Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees	
Zip	24115 CHILLAGE	724185 -	Country Secaso	 This corporation owes or has paid the or 		
24	25	29 37603 30) JAKA30	Torderial (Topolity Tax das delle del	No No	
9, Name and Address of New Registered Agent 10. Name and Address of New Registered Agent 11. Name and Address of New Registered Agent 12. Name						
	RNHAM, ALICE		e			
			82 Stree	Street Address (P.O. Box Number is Not Acceptable)		
VENICE FL 34293						
			83			
			84 City	F	85 Zip Code	
Mad Division College	a the provision of Parties COV CCC	and 607 1600 Finds Otal 1	the above see	ed corporation submits this statement for the purpose	of changing its registered	
office or re	io ine provisions of Sections 607.0502 egi ster ed agent, or both, in the State (of Florida. Such change was aut	horized by the co	orporation's board of directors. I hereby accept the ap	pointment as registered	
agent. I ar	m familiar with, and accept the obliga-	tions of, Section 607.0505, Florid	da Statutes			
SIGNATURE .	Signature, lyped or printed name of registered apen	Land the it are leadle ANOTE D	tenistored Amont signat	ure required when reinstating) DATE		
12.	OFFICERS AND		13.	ADDITIONS/CHANGES TO OFFICERS AN	D DIRECTORS IN 12	
TITLE	D	☐ DELETE	1.1 TITLE	PRESTABAT (VICE) UP	Change Addition	
NAME	BURNHAM, ALICE		1.2 NAME	I who I do not a find a first		
STREET ADDRESS	452 MORNINGSIDE ROAD		1.3 STREET ADDRESS	s		
CITY-ST-ZIP	VENICE FL 34293		1.4 CITY - ST - ZIP			
TITLE	D	DELETE	2.1 TITLE	PRESIDENT	Change Addition	
NAME	BURNHAM, DONALD R		2.2 NAME			
STREET ADDRESS	451 MORNINGSIDE RD		2.3 STREET ADDRESS	6		
CITY-ST-ZIP	VENICE FL		2. 4 CITY - ST - ZIP	<u> </u>		
TITLE		☐ DELETE	3.1 TITLE	ZECKETAY	Change Addition	
NAME			3.2 NAME	Catherine A. Eyans		
STREET ADDRESS			3.3 STREET ADDRESS	205 Base Hyenup		
CITY+ST-ZIP			3.4. CITY - \$T - 2IP	VENICE, FL 5 728		
TITLE		☐ DELETE	4.1 TITLE	TERASURES	Change Addition	
NAME			4. 2 NAME	STEPAEN K MANA	•	
STREET ADDRESS			4.3 STREET ADDRESS	SAND THE PARTY TO		
CITY-ST-ZIP		The section is	4.4 CITY - ST - ZIP	VENICE, FLOTHOS	D 04-20-	
TITLE		☐ DELETE	5.1 TITLE		Change Addition	
NAME			5.2 NAME		١٨	
STREET ADDRESS			5.3 STREET ADDRESS		56517	
CITY-ST-ZIP		Dri ett	5.4 CITY - ST - ZIP		Chongo I salabira	
TITLE		☐ DELETE	G.1 TITLE	0000025180 -05/11/9801019 ***150.00	Change Addition	
NAME			6.2 NAME	-05/11/9801019	 N13	
STREET ADDRESS			6.3 STREET ADDRESS	***150.00	Q1J	
CITY-ST-ZIP			6.4 CITY - ST - ZIP			

14. Thereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i). Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 trusted empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.