

**2024 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N98000001433

**Entity Name:** THE INTERNATIONAL SEAKEEPERS SOCIETY, INC.

**FILED**  
**Feb 22, 2024**  
**Secretary of State**  
**5901881418CC**

**Current Principal Place of Business:**

255 ARAGON AVENUE  
THIRD FLOOR  
CORAL GABLES, FL 33134

**Current Mailing Address:**

255 ARAGON AVENUE  
THIRD FLOOR  
CORAL GABLES, FL 33134 US

**FEI Number: 58-2385869**

**Certificate of Status Desired: Yes**

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

MOORE, MICHAEL  
255 ARAGON AVENUE  
THIRD FLOOR  
MIAMI, FL 33134 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

**Officer/Director Detail :**

Title CHAIRMAN EMERITUS  
Name MOORE, MICHAEL T.  
Address 255 ARAGON AVENUE  
THIRD FLOOR  
City-State-Zip: MIAMI FL 33134

Title CHAIRMAN, PRESIDENT & CEO  
Name WADE, JAY  
Address 5100 NW 159TH STREET  
City-State-Zip: EDMOND OK 73013

Title DIRECTOR  
Name CHANG, JULIAN  
Address 2B ROCHALIE DRIVE  
City-State-Zip: SINGAPORE 248231

Title DIRECTOR  
Name LUTHER, MARK  
Address 2180 BAYOU GRANDE BLVD. NE  
City-State-Zip: ST. PETERSBURG FL 33073

Title VICE CHAIR  
Name ELKUS, PATTY  
Address 16720 NORRBOM RD  
City-State-Zip: SONOMA CA 95476

Title DIRECTOR  
Name TREASE, NORMA  
Address 930 SW 21 STREET  
City-State-Zip: FORT LAUDERDALE FL 33315

*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: JAY WADE**

**PRESIDENT**

**02/22/2024**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date