

**2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

**FILED  
Sep 08, 2004  
Secretary of State**

DOCUMENT# N96000001341

Entity Name: THE INFINITE WAY OF THE MARTIAL ARTS, INC.

**Current Principal Place of Business:**

46 WEST 21ST STREET  
RIVIERA BEACH, FL 33404

**New Principal Place of Business:**

**Current Mailing Address:**

5324 53RD WAY  
WEST PALM BEACH, FL 33409

**New Mailing Address:**

FEI Number: 65-0676317      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

WILLIAMS, DAVID A  
5324 53RD WAY  
WEST PALM BEACH, FL 33409      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: D      ( ) Delete  
Name: WILLIAMS, DAVID A  
Address: 5324 53RD WAY  
City-St-Zip: WEST PALM BEACH, FL 33409

Title: D      ( ) Delete  
Name: BURNEY, DENISE M  
Address: 5324 53RD WAY  
City-St-Zip: WEST PALM BEACH, FL 33409

Title: D      ( ) Delete  
Name: MCCRAY, ROBERT L  
Address: 2631-E AVENUE R  
City-St-Zip: RIVIERA BEACH, FL 33404

Title: D      ( ) Delete  
Name: GRAY-LEWIS, LECIA  
Address: 4000 HEATH CIRCLE SO  
City-St-Zip: WEST PALM BEACH, FL 33407

Title: ST      ( ) Delete  
Name: MOULTRIE, RANGELIQUE M  
Address: 1420 WEST 27TH STREET  
City-St-Zip: RIVIERA BEACH, FL 33404

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

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: DENISE M. BURNEY

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

A/DI

09/08/2004

\_\_\_\_\_  
Date