2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jun 06, 2008
Secretary of State

DOCUMENT# 725985

Entity Name: CUONG NHU ORIENTAL MARTIAL ARTS ASSOCIATION,INC.

Current Principal Place of Business:

CNOMAA
3705 LEEWOOD LANE
JACKSONVILLE, FL 32217 US

New Principal Place of Business:

CNOMAA
5043 MONROE FOREST DR.
JACKSONVILLE, FL 32257 US

Current Mailing Address:

CNOMAA
3705 LEEWOOD LANE
JACKSONVILLE, FL 32217 US

New Mailing Address:

CNOMAA
5043 MONROE FOREST DR.
JACKSONVILLE, FL 32257 US

FEI Number: 59-1548979 **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:

BRUNO, JESSICA A
3705 LEEWOOD LN.
JACKSONVILLE, FL 32217 US

Name and Address of New Registered Agent:

BRUNO, JESSICA A
5043 MONROE FOREST DR.
JACKSONVILLE, FL 32257 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: _____ 06/06/2008
Electronic Signature of Registered Agent — Date

OFFICERS AND DIRECTORS:

Title: D ( ) Delete
Name: FARBER, KIRK
Address: 331 10 STREET
City-St-Zip: ATLANTIC BEACH, FL 32233

Title: T ( ) Delete
Name: CAMPEAU, BILL
Address: 9115 GREYSTONE VALLEY DR
City-St-Zip: OLDFORT, TN 37362

Title: PD ( ) Delete
Name: NGO, THU
Address: 12801 CANUEUIA BAY DR W
City-St-Zip: JACKSONVILLE, FL 32223

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:

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: THU NGO PD 06/06/2008
Electronic Signature of Signing Officer or Director — Date