

# **2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 725985

**FILED**  
**Apr 09, 2012**  
**Secretary of State**

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

**Current Principal Place of Business:**

CNOMAA  
4654 JULINGTON CREEK RD.  
JACKSONVILLE, FL 32258 US

**New Principal Place of Business:**

**Current Mailing Address:**

CNOMAA  
4654 JULINGTON CREEK RD.  
JACKSONVILLE, FL 32258 US

**New Mailing Address:**

**FEI Number:** 59-1548979

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

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

BRUNO, JESSICA A  
4654 JULINGTON CREEK RD.  
JACKSONVILLE, FL 32258 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  
**Name:** FARBER, KIRK  
**Address:** 331 10 STREET  
**City-St-Zip:** ATLANTIC BEACH, FL 32233

**Title:** T  
**Name:** CAMPEAU, BILL  
**Address:** 860 SHOWERS LANE  
**City-St-Zip:** MARTINSBURG, WV 25403

**Title:** PD  
**Name:** NGO, THU  
**Address:** 12801 CAMELLIA BAY DR W  
**City-St-Zip:** JACKSONVILLE, FL 32223

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:** KIRK FARBER

D

04/09/2012

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

\_\_\_\_\_  
Date