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May 05 1997 8:00am  
Secretary of State

NONPROFIT  
CORPORATION  
ANNUAL REPORT  
1997



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # 733958 (3)

1. Corporation Name

NATIONAL ASSOCIATION OF DEFENSIVE ARTS AND SCIENCES, INC.

Principal Place of Business

Mailing Address

675 RIVERSIDE DR.  
ORMOND BEACH FL 32176-7879

675 RIVERSIDE DR.  
ORMOND BEACH FL 32176-7879



3. Date Incorporated or Qualified  
09/30/1975

3a. Date of Last Report  
04/24/1996

2. Principal Place of Business

2a. Mailing Address

4. FEI Number

59-2948835

Applied For

Not Applicable

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

5. Certificate of Status Desired

☐ \$8.75 Additional  
Fee Required

22 City & State

27 City & State

6. Election Campaign Financing  
Trust Fund Contribution

☐ \$5.00 May Be  
Added to Fees

23 Zip

Country

28 Zip

Country

8. This corporation has liability for intangible tax under s. 199.032,  
Florida Statutes ☐ Yes ☒ No

24 25 29 30  
9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

HORAN, RUTH  
675 RIVERSIDE DRIVE  
ORMOND BEACH FL

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE PD ☐ DELETE

NAME HORAN, RUTH  
STREET ADDRESS 675 RIVERSIDE DR  
CITY-ST-ZIP ORMOND BEACH, FL 00000

1.1 TITLE ☐ Change ☐ Addition

TITLE SD ☐ DELETE

NAME OSSINSKY, LOUIS JR  
STREET ADDRESS 924 PENINSULA DR  
CITY-ST-ZIP ORMOND BEACH, FL 00000

1.2 NAME ☐ Change ☐ Addition

TITLE TD ☐ DELETE

NAME HORAN, RUTH  
STREET ADDRESS 675 RIVERSIDE DR.  
CITY-ST-ZIP ORMOND BEACH FL

1.3 STREET ADDRESS ☐ Change ☐ Addition

TITLE DV ☐ DELETE

NAME DEMMING, JAMES  
STREET ADDRESS 530 RIVERSIDE DRIVE  
CITY-ST-ZIP ORMOND BCH, FL 32176

1.4 CITY-ST-ZIP ☐ Change ☐ Addition

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

2.1 TITLE ☐ Change ☐ Addition

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

2.2 NAME ☐ Change ☐ Addition

4.1 STREET ADDRESS  
4.2 CITY-ST-ZIP

14. I do hereby 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 trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

RUTH HORAN APRIL 11, 1997 904-672-3251

CP2E037 (9/96)