

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000008650

FILED
May 04, 2007
Secretary of State

Entity Name: JOE LEWIS FIGHTING SYSTEMS BLACK BELT ASSOCIATION, INC.

Current Principal Place of Business:

17802 GREY BROOKE DR
TAMPA, FL 33647

New Principal Place of Business:

Current Mailing Address:

17802 GREY BROOKE DR
TAMPA, FL 33647

New Mailing Address:

FEI Number: 22-3850342 **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:

Name and Address of New Registered Agent:

ALLEN, MICHAEL E
17802 GREY BROOKE DR
TAMPA, FL 33647 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

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: ALLEN, MICHAEL E
Address: 17802 GREYBROOKE DR.
City-St-Zip: TAMPA, FL 33647

Title: D () Delete
Name: MARSHALL, IAN
Address: 151 RUTHERFORD LANE
City-St-Zip: STUARTS DRAFT, VA 24477

Title: D () Delete
Name: MAYNARD, JOHN
Address: 127 COLLEGE RD.
City-St-Zip: WILMINGTON, NC 28403

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: CEO (X) Change () Addition
Name: ALLEN, MICHAEL E
Address: 17802 GREYBROOKE DR.
City-St-Zip: TAMPA, FL 33647

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

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

Title: D () Change (X) Addition
Name: ALLEN, JOANNE W VP
Address: 17802 GREY BROOKE DR
City-St-Zip: TAMPA, FL 33647

Title: D () Change (X) Addition
Name: DOMINGUEZ, EDDIE
Address: 40309 FERNBROOK LANE
City-St-Zip: TAMPA, FL 33624

Title: D () Change (X) Addition
Name: DOMINGUEZ, CIRO
Address: 4016 HARBOR LAKE
City-St-Zip: LUTZ, FL 33358

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: MICHAEL E. ALLEN

CEO

05/04/2007

Electronic Signature of Signing Officer or Director

Date