

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000007426

FILED
Mar 09, 2009
Secretary of State

Entity Name: KYUDO SOCIETY OF FLORIDA, INC.

Current Principal Place of Business:

1233 NW 30 AVE
GAINESVILLE, FL 32609

New Principal Place of Business:

Current Mailing Address:

1233 NW 30 AVE
GAINESVILLE, FL 32609

New Mailing Address:

FEI Number: 01-0745977 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MORIN, DOUGLAS P
1233 NW 30 AVE
GAINESVILLE, FL 32609 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: PD () Delete
Name: MORIN, DOUGLAS P
Address: 1233 NW 30 AVE
City-St-Zip: GAINESVILLE, FL 32609

Title: COMD () Delete
Name: MCADAMS, MELINDA J
Address: 206 NE THIRD STREET
City-St-Zip: GAINESVILLE, FL 32601

Title: VPD () Delete
Name: QUINT, PATRICK
Address: 17016 NW 32RD AVE
City-St-Zip: NEWBERRY, FL 32669

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: DOUG MORIN

PD

03/09/2009

Electronic Signature of Signing Officer or Director

_____ Date