

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000004995

FILED
Jan 24, 2009
Secretary of State

Entity Name: NORTH FLORIDA SCHOOL OF AIKIDO, INC.

Current Principal Place of Business:

8808 BULL HEADLEY RD.
TALLAHASSEE, FL 323129079

New Principal Place of Business:

Current Mailing Address:

8808 BULL HEADLEY RD.
TALLAHASSEE, FL 323129079

New Mailing Address:

FEI Number: 04-3795138

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WUJCIK, TRACY W
8808 BULL HEADLEY RD.
TALLAHASSEE, FL 323129079 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: PSTD () Delete
Name: WUJCIK, TRACY W
Address: 8808 BULL HEADLEY RD.
City-St-Zip: TALLAHASSEE, FL 323129097

Title: D () Delete
Name: MOORE, RICHARD
Address: 211 RHODEN COVE RD
City-St-Zip: TALLAHASSEE, FL 32310

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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: TRACY W WUJCIK

PRES

01/24/2009

Electronic Signature of Signing Officer or Director

Date