2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 30, 2006
Secretary of State

DOCUMENT# N05000005319

Entity Name: UNITED WORLD AIKIDO FEDERATION, INC.

Current Principal Place of Business:

133 BONITA RD
ST AUGUSTINE, FL 32086

New Principal Place of Business:

239 JASMINE RD
ST AUGUSTINE, FL 32086

Current Mailing Address:

133 BONITA RD
ST AUGUSTINE, FL 32086

New Mailing Address:

239 JASMINE RD
ST AUGUSTINE, FL 32086

FEI Number: **FEI Number Applied For (X)** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

FREEMAN, LEANNA S.A.
FREEMAN AND BURK
236 SAN MARCO AVE
ST AUGUSTINE, FL 32084 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: CHANDLER, LEWIS N
Address: 133 BONITA RD
City-St-Zip: ST AUGUSTINE, FL 32086

Title: SD ( ) Delete
Name: FOX, SHEILA
Address: 133 BONITA RD
City-St-Zip: ST AUGUSTINE, FL 32086

Title: VPD ( ) Delete
Name: CHANDLER, ADAM J
Address: 133 BONITA RD
City-St-Zip: ST AUGUSTINE, FL 32086

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition
Name: CHANDLER, LEWIS N
Address: 239 JASMINE RD
City-St-Zip: ST AUGUSTINE, FL 32086

Title: SD (X) Change ( ) Addition
Name: FOX, SHEILA
Address: 239 JASMINE RD
City-St-Zip: ST AUGUSTINE, FL 32086

Title: VPD (X) Change ( ) Addition
Name: CHANDLER, ADAM J
Address: 239 JASMINE RD
City-St-Zip: ST AUGUSTINE, FL 32086

I hereby certify that the information supplied with this filing does not qualify for the 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: LEWIS NEIL CHANDLER PREZ 03/30/2006
Electronic Signature of Signing Officer or Director — Date