

# **2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N05000005319

**FILED**  
**Feb 19, 2010**  
**Secretary of State**

**Entity Name:** UNITED WORLD AIKIDO FEDERATION, INC.

**Current Principal Place of Business:**

322 DEERFEILD GLEN DRIVE  
ST AUGUSTINE, FL 32086

**New Principal Place of Business:**

**Current Mailing Address:**

322 DEERFEILD GLEN DRIVE  
ST AUGUSTINE, FL 32086

**New Mailing Address:**

**FEI Number:** 51-0550717

**FEI Number Applied For ( )**

**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  
**Name:** CHANDLER, LEWIS N  
**Address:** 322 DEERFEILD GLEN DRIVE  
**City-St-Zip:** ST AUGUSTINE, FL 32086

**Title:** SD  
**Name:** FOX, SHEILA  
**Address:** 322 DEERFEILD GLEN DRIVE  
**City-St-Zip:** ST AUGUSTINE, FL 32086

**Title:** VPD  
**Name:** CHANDLER, ADAM J  
**Address:** 322 DEERFEILD GLEN DRIVE  
**City-St-Zip:** ST AUGUSTINE, FL 32086

I hereby 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 all other like empowered.

**SIGNATURE:** LEWIS NEIL CHANDLER

**PRES**

**02/19/2010**

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date