

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

DOCUMENT# N06000004023

**FILED**  
**Apr 30, 2010**  
**Secretary of State**

**Entity Name:** INT'L CHRISTIAN MARTIAL ARTS ASSOCIATION INC

**Current Principal Place of Business:**

11471 W SAMPLE RD #9  
CORAL SPRINGS, FL 33065

**New Principal Place of Business:**

**Current Mailing Address:**

11471 W SAMPLE RD #9  
CORAL SPRINGS, FL 33065

**New Mailing Address:**

**FEI Number:** 20-4597404

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

WILES, JERRY  
11471 W SAMPLE RD #9  
CORAL SPRINGS, FL 33065 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: P  
Name: WILES, JERRY  
Address: 11471 W SAMPLE RD #9  
City-St-Zip: CORAL SPRINGS, FL 33065

Title: VP  
Name: BARLETTA, LUCIANNO  
Address: 11471 W SAMPLE RD #9  
City-St-Zip: CORAL SPRINGS, FL 33065

Title: SEC  
Name: WILES, DIANE  
Address: 11471 W SAMPLE RD #9  
City-St-Zip: CORAL SPRINGS, FL 33065

Title: TRES  
Name: WOLFE, PAT  
Address: 11471 W SAMPLE RD #9  
City-St-Zip: CORAL SPRINGS, FL 33065

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:** JERRY WILES

PRES

04/30/2010

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

\_\_\_\_\_  
Date