

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08000010383

FILED
May 01, 2009
Secretary of State

Entity Name: BAS-I KYOKUSHIN CULTURAL SOCIETY, INC.

Current Principal Place of Business:

17030 SOUTH DIXIE HWY
VILLAGE OF PALMETTO BAY, FL 33157

New Principal Place of Business:

Current Mailing Address:

17030 SOUTH DIXIE HWY
VILLAGE OF PALMETTO BAY, FL 33157

New Mailing Address:

FEI Number: FEI Number Applied For (X) FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

JAMES, NEWTON
17030 SOUTH DIXIE HWY
VILLAGE OF PALMETTO BAY, FL 33157 US

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: D () Delete
Name: NEWTON, JAMES
Address: 16110 SW 96TH COURT
City-St-Zip: MIAMI, FL 33157

Title: D () Delete
Name: THOMPSON, NEVILLE
Address: 7470 MIAMI LAKES DR
City-St-Zip: MIAMI LAKES, FL 33014

Title: D () Delete
Name: BANISADR, ALI
Address: 15873 SW 84TH STREET
City-St-Zip: MIAMI, FL 33193

Title: D () Delete
Name: COHEN, NEVILLE
Address: 920 A SW 80TH AVE
City-St-Zip: N. LAUDERDALE, FL 33068

Title: D () Delete
Name: SMITH, YESENIA
Address: 11417 SW 150TH DR
City-St-Zip: MIAMI, FL 33176

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:

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: JAMES NEWTON

DIR

05/01/2009

Electronic Signature of Signing Officer or Director

Date