

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N09000007386

**FILED**  
**Mar 13, 2012**  
**Secretary of State**

**Entity Name:** UNITED STATES AMATEUR MIXED MARTIAL ARTS INC.

**Current Principal Place of Business:**

12150 HAVBURG DR  
PENSACOLA, FL 32506

**New Principal Place of Business:**

12156 HAVBURG DR  
PENSACOLA, FL 32506

**Current Mailing Address:**

12150 HAVBURG DR  
PENSACOLA, FL 32506

**New Mailing Address:**

12156 HAVBURG DR  
PENSACOLA, FL 32506

FEI Number: 27-0646686

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

HAVEN, TERRY  
12150 HAVBURG DR  
PENSACOLA, FL 32506 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: HAVEN, TERRY  
Address: 111 WILLOW LAKE DR  
City-St-Zip: FAIRHOPE, AL 36532

Title: TD  
Name: DOWNS, ALICE  
Address: 12156 HAVBURG DR  
City-St-Zip: PENSACOLA, FL 32506

Title: D  
Name: SMITH, BRIAN D  
Address: 1136 MASKOKE DR.  
City-St-Zip: PENSACOLA, FL 32533

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: TERRY HAVEN

PD

03/13/2012

Electronic Signature of Signing Officer or Director

Date