

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jul 16, 2004 8:00 am
Secretary of State

07-16-2004 90007 043 ****61.25

DOCUMENT # N38700

1. Entity Name
WORLD MARTIAL ARTS RESEARCH FOUNDATION, INC.



Principal Place of Business
**Y.K. KIM PRODUCTIONS, INC.
1630 EAST COLONIAL DRIVE
ORLANDO, FL 32803**

Mailing Address
**Y.K. KIM PRODUCTIONS, INC.
1630 EAST COLONIAL DRIVE
ORLANDO, FL 32803**

54062657



2. Principal Place of Business

3. Mailing Address

07082004 Chg-NP CR2E037 (10/03)

Suite, Apt. #, etc.

Suite, Apt. #, etc.

4. FEI Number
59-2991614

Applied For
Not Applicable

City & State

City & State

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

Zip

Country

Zip

Country

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**Y.K. KIM PRODUCTIONS INC
1630 EAST COLONIAL DRIVE
ORLANDO, FL 32803**

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**Filing Fee is \$61.25
Due by September 8, 2004**

9. Election Campaign Financing:
Trust Fund Contribution ☐

**\$5.00 May Be
Added to Fees**

**Make check payable to
Florida Department of State**

10. OFFICERS AND DIRECTORS

TITLE **C** ☐ Delete
NAME **KIM, YOUNG KUN**
STREET ADDRESS **1630 EAST COLONIAL DRIVE**
CITY-ST-ZIP **ORLANDO, FL 32803**

TITLE **PSTD** ☐ Delete
NAME **MCCARTHY, TIM**
STREET ADDRESS **1630 E COLONIAL DRIVE**
CITY-ST-ZIP **ORLANDO, FL 32803**

TITLE **V** ☐ Delete
NAME **WINKLE, KEITH**
STREET ADDRESS **10825 MIDLOTHIAN TPK #105**
CITY-ST-ZIP **RICHMOND, VA. 23236**

TITLE **D** ☐ Delete
NAME **MCLAUGHLIN, JOHN**
STREET ADDRESS **1630 E COLONIAL DRIVE**
CITY-ST-ZIP **ORLANDO, FL 32803**

TITLE **D** ☐ Delete
NAME **PELT, KIRK**
STREET ADDRESS **1630 E. COLONIAL DR**
CITY-ST-ZIP **ORLANDO, FL 32803**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE **CHAIRMAN / CEO** ☒ Change ☐ Addition
NAME **KIM, YOUNG KUN**
STREET ADDRESS **1630 EAST COLONIAL DR**
CITY-ST-ZIP **ORLANDO, FL 32803**

TITLE **VICE CHAIRMAN** ☒ Change ☐ Addition
NAME **MCCARTHY, TIM**
STREET ADDRESS **1630 EAST COLONIAL DR.**
CITY-ST-ZIP **ORLANDO, FL 32803**

TITLE **VICE CHAIRMAN** ☒ Change ☐ Addition
NAME **WINKLE, KEITH**
STREET ADDRESS **10825 MIDLOTHIAN TPK**
CITY-ST-ZIP **RICHMOND, VA 23236**

TITLE **PRESIDENT / CFO** ☒ Change ☐ Addition
NAME **PELT, KIRK**
STREET ADDRESS **1630 EAST COLONIAL DR.**
CITY-ST-ZIP **ORLANDO, FL 32803**

TITLE **SECRETARY GENERAL** ☒ Change ☐ Addition
NAME **MCLAUGHLIN, JOHN**
STREET ADDRESS **1630, EAST COLONIAL DR.**
CITY-ST-ZIP **ORLANDO, FL 32803**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

7-12-04

Date

407-897-6000

Daytime Phone #