FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT #

N46099

(0)

CHRISTIAN MARTIAL ARTS ASSOCIATION, INC.

FILED								
May 19 1998 8:00am								
Secretary of State								

	-		<u> </u>						
Principal Place of Business Mailing Address)	
1599 BANKS RO		1599 BANKS ROAD	MARGATE FL 33063			3. Date Incorporated or Qualified			
MARGATE FL 3	3069					11/18/1991			
US		US				4. FEI Number	<u> </u>	Applied For	
						NOT APPLICABLE		Not Applicable	
2. Principal Place of Business 2s. Mailing Address						5. Certificate of Status Desired	\$8.7	5 Additional	
21	<u> </u>	26				Vi Certificate of Status Desired	Fee	Required	
Suite, Apt.	#, ét c.	├ ─┐	Suite, Apt. #, etc.			6. Election Campaign Financing		O May Be	
22 Ch. P. Cha.			27			Trust Fund Contribution		d to Fees	
City & State	8	—	City & State			7. Is this nonprofit corporation a homeowners association?			
Zip Country		Zip	Zip Country			☐ Yes X No			
25		29	30			 This corporation owes or has paid the c Personal Property Tax due June 30. 	urrent year XI Yes	Intangible No	
		of Current Registered Agent	1301			10. Name and Address of New Registered	\sim	<u> </u>	
				B1	Name				
ADETON	, Pe ter L.		L						
	RTH FLAGLER DRIVE		1	82	Street Addres	ss (P.O. Box Number is Not Acceptable)			
	LOOR, BARNETT CENT	rae	Ţ.	B3					
	BEACH FL 33401		-	\perp					
44 1 7 SEA	DENOTITE COTOT			B4	City	Fi	85 Z	Cip Code	
11. Pursuant	to the provisions of Section	ns 617.0502 and 617.1508, Florida Sta	atutes, the ab	—⊥ 0V⊖-I	named corpo	ration submits this statement for the purpose	of observin	g its registered	
office or r	e giste red agent, or both, ii	n the State of Florida. Such change want the obligations of, Section 617.0503,	as authorized	by t	he corporatio	on's board of directors. I hereby accept the ap	pointment	as registered	
-								•	
SIGNATURE _	Signature, typed or printed name of	registered agent and title if applicable. (I	NOTE: Registered	Agent	signature required	d when reinstating) DATE			
12,	OFFICERS AND DIRECTORS		13.	13.		ADDITIONS/CHANGES TO OFFICERS AN	ID DIRECT	ORS IN 12	
TITLE	Đ	DELETE	1.1 TITE	.E			☐ Chang	ge L Addition	
NAME	Batten, Bob		1.2 NAM	Æ]				
STREET ADDRESS	1574 N.W. 65TH TEF	RRACE	1.3 STR	EET A	DORESS				
CITY-ST-ZIP	MARGATE FL		1.4 CIT		ZIP				
TITLE	D	☐ DELETE	2.1 TITL				☐ Chang	ge ∐ Addition	
NAME	FIELDS, TRACY		2.2 NAM	Æ			,		
STREET ADDRESS	957 N.W. 82ND AVE		2.3 STR	EET AC	DDRESS			,	
CITY-ST-ZIP	CORAL SPRINGS FL		2. 4 C(T		-ZIP		06-	4 4 4 6 0 -	
TITLE	PD WILLS IEDDA	☐ DELETE	3.1 TITE				L Chang	ge Addition	
NAME	WILES, JERRY L.		3.2 NAM						
STREET ADDRESS	1480 NW 69 AVE		•		DDRESS				
CITY-ST-ZIP	MARGATE FL D	DELETE	3.4. CIT		ZIP		Chang	pe	
TITLE			4.1 1111				L. Chang	ke Prominon i	
NAME EXPECT ADDRESS	WILES, TAMI 1480 NW 69 AVE		4. 2 NA		DDDCCC			ſ	
STREET ADDRESS					DDRESS				
CITY-ST-ZIP TITLE	MARGATE FL D	DELETE	4.4 CITY 5.1 TITL		ZIP		☐ Chang	ge Addition	
NAME	ESCOBAR, JUSTO	_ Settle	5.1 IIIL		1			Jo Addition	
STREET ADDRESS	11069 GLENWOOD (NR			DDRESS			ļ	
ł	CORAL SPRINGS FL	vn.			1				
CITY-ST-ZIP TITLE	OUNT OF HINGS FL	DELETE	5.4 CITY 6.1 TITL		ZIF		Chang	ne	
NAME		على عدداد	6.2 NAM				والسرح س	, La Roution	
STREET ADDRESS			6.3 STR		JDDESC				
l.					- 1	·			
City-St-ZiP	artify that the information s	supplied with this filing does not qualif	6.4 CiTY			ection 119 07(3Vi) Florida Statutes, I further	antify that	the information	

nereuy ceruly 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

Jug Lill

5-1-98

954-968-5659