

**2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N92000000691

**FILED  
May 10, 2004  
Secretary of State****Entity Name:** GAINESVILLE KODOKAI AIKIDO ASSOCIATION, INC.**Current Principal Place of Business:**4603 NW 6TH ST  
HIGH SPRINGS, FL 32643**New Principal Place of Business:****Current Mailing Address:**8590 NE 40TH COURT  
GAINESVILLE, FL 32607 US**New Mailing Address:**

FEI Number: 59-3160730      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**PRESCOTT, MICHAEL E  
8590 NE 40TH COURT  
HIGH SPRINGS, FL 32643 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: DT ( ) Delete  
Name: PRESCOTT, MICHAEL E  
Address: 8590 NE 40TH COURT  
City-St-Zip: HIGH SPRINGS, FL 32643Title: D ( ) Delete  
Name: SIN, PETER  
Address: 1225 NE 5TH TERR  
City-St-Zip: GAINESVILLE, FL 32601Title: D ( ) Delete  
Name: FEASEL, MARLYNN  
Address: 2222 NW 40TH TERRACE  
City-St-Zip: GAINESVILLE, FL 32605**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:Title: D (X) Change ( ) Addition  
Name: FEASEL, MARLYNN  
Address: 13709 PROGRESS BLVD  
City-St-Zip: ALACHUA, FL 32615

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 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: MICHAEL E. PRESCOTT

DT

05/10/2004

Electronic Signature of Signing Officer or Director

Date