

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N95000000239

1. Entity Name

THE CORNERSTONE MARTIAL ARTS ASSOCIATION, INC.

Principal Place of Business

7884 ST. ANDREWS ROAD
LAKE WORTH FL 33467

Mailing Address

7884 ST. ANDREWS ROAD
LAKE WORTH FL 33467

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

Zip

Country

3. Mailing Address

Suite, Apt. #, etc.

City & State

Zip

Country

4. FEI Number

65-0553633

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

ROBINSON, ROY
7884 ST. ANDREWS ROAD
LAKE WORTH FL 33467

Name

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

City

FL

Zip Code

7. Name and Address of New Registered Agent

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.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW: FEE IS \$61.25
After September 12, 2001, min. will be \$236.25

9. Election Campaign Financing
Trust Fund Contribution.

☐

\$5.00 May Be
Added to Fees

Make Check Payable to
Department of State

10. OFFICERS AND DIRECTORS

TITLE D
NAME ROBINSON, ROY
STREET ADDRESS 7884 ST. ANDREWS ROAD
CITY-ST-ZIP LAKE WORTH FL 33467 ☐ Delete

TITLE D
NAME EDWARDS, LAURA
STREET ADDRESS 188 WOODLANDS ROAD
CITY-ST-ZIP PALM SPRINGS FL 33461 ☒ Delete

TITLE D
NAME LUCAS, LISA
STREET ADDRESS 188 WOODLANDS ROAD
CITY-ST-ZIP PALM SPRINGS FL 33461 ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

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

TITLE D
NAME Patricia Machu
STREET ADDRESS 1320 12th AVE S. #2
CITY-ST-ZIP Lake Worth, FL 33461 ☐ Change ☒ Addition

TITLE D
NAME Kelly Machu
STREET ADDRESS 3174 Foxridge Court
CITY-ST-ZIP Palm Springs, FL 33461 ☐ Change ☒ Addition

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

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

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

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:

R. Robinson

9/1/01

561-422-4546

FILED
Sep 13, 2001 8:00 am
Secretary of State

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DO NOT WRITE IN THIS SPACE

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