2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
May 03, 2006
Secretary of State

DOCUMENT# N98000004559

Entity Name: WEST FLORIDA AIKIKAI, INC.

Current Principal Place of Business:

2447 EXECUTIVE PLAZA DR
SUITE 5
PENSACOLA, FL 32504

New Principal Place of Business:

Current Mailing Address:

2447 EXECUTIVE PLAZA DR
SUITE 5
PENSACOLA, FL 32504

New Mailing Address:

FEI Number: 59-3575200 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

MOORE, RICHARD W
502 E PARK AVE
TALLAHASSEE, FL 32301 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:	D	( ) Delete
Name:	BYERS, JOSEPH E JR.	
Address:	208 DWIGHT AVE	
City-St-Zip:	PENSACOLA, FL 32507	
Title:	VD	( ) Delete
Name:	RHODES, JERRY	
Address:	7771 TRINITY CHURCH RD	
City-St-Zip:	MILTON, FL 32570	
Title:	D	( ) Delete
Name:	CALHOUN, FRANK	
Address:	5490 FLAX RD	
City-St-Zip:	PENSACOLA, FL 32504	
Title:	D	( ) Delete
Name:	BROWNE, WALTER	
Address:	408 CORNWALL CIR	
City-St-Zip:	PENSACOLA, FL 32514	
Title:	D	( ) Delete
Name:	ROSS, LONNIE J	
Address:	2213 VALLEY ESCONDIDO DR.	
City-St-Zip:	PENSACOLA, FL 32526 US	
Title:	PD	( ) Delete
Name:	HEATH, PATRICIA	
Address:	1160 SUNSET LN	
City-St-Zip:	GULF BREEZE, FL 32561	

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:	D	(X) Change ( ) Addition
Name:	KELLEY, JEREMY	
Address:	805 RUE MAX DR	
City-St-Zip:	PENSACOLA, FL 32507	
Title:	D	(X) Change ( ) Addition
Name:	BYERS, ANGELIA	
Address:	208 DWIGHT AVE	
City-St-Zip:	PENSACOLA, FL 32507	
Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, 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: ANGELIA BYERS D 05/03/2006

Electronic Signature of Signing Officer or Director — Date