2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N99000004704

FILED Mar 19, 2009 Secretary of State

Entity Name: THE TOMODACHI JUDO CLUB OF BOCA RATON, INC.

Current Principal Place of Business:		New Principal Place	New Principal Place of Business:	
2534 SW BOYNTON	12TH ST N BEACH, FL 33426			
Current Mailing Address:		New Mailing Addres	New Mailing Address:	
2534 SW BOYNTOI	12TH ST N BEACH, FL 33426			
FEI Number	r: 65-0565580 FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and	d Address of Current Registered Agent:	Name and Address	of New Registered Agent:	
2534 SW	R, MICHAEL 12TH ST N BEACH, FL 33426 US			
	e named entity submits this statement for the p e of Florida.	ourpose of changing its registere	ed office or registered agent, or both,	
SIGNATU	RE:			
	Electronic Signature of Registered Age	ent	Date	
OFFICER	S AND DIRECTORS:	ADDITIONS/CHANG	ES TO OFFICERS AND DIRECTOR	
Title: Name:	D () Delete VOGT, HANS	Title:	() Change () Addition	
Address: City-St-Zip:	4354 BRANDON DRIVE DELRAY BEACH, FL 33445	Name: Address: City-St-Zip:		
Address:	4354 BRANDON DRIVE	Address:	()Change ()Addition	
Address: City-St-Zip: Title: Name: Address:	4354 BRANDON DRIVE DELRAY BEACH, FL 33445 D () Delete DEGEORGIA, JAMES 17288 HAMPTON BLVD	Address: City-St-Zip: Title: Name: Address:	() Change () Addition () Change () Addition	
Address: City-St-Zip: Title: Name: Address: City-St-Zip: Title: Name: Address:	4354 BRANDON DRIVE DELRAY BEACH, FL 33445 D () Delete DEGEORGIA, JAMES 17288 HAMPTON BLVD BOCA RATON, FL 33496 DP () Delete SZRESTER, MICHAEL 2534 SW 12TH STREET	Address: City-St-Zip: Title: Name: Address: City-St-Zip: Title: Name: Address:		
Address: City-St-Zip: Title: Name: Address: City-St-Zip: Title: Name: Address: City-St-Zip: Title: Name: Address: City-St-Zip: Address: Address: Address:	4354 BRANDON DRIVE DELRAY BEACH, FL 33445 D () Delete DEGEORGIA, JAMES 17288 HAMPTON BLVD BOCA RATON, FL 33496 DP () Delete SZRESTER, MICHAEL 2534 SW 12TH STREET BOYNTON BEACH, FL 33426 DS () Delete SHAW, ROBIN 6503 N MILITARY TRAIL #2000	Address: City-St-Zip: Title: Name: Address: City-St-Zip: Title: Name: Address: City-St-Zip: Title: Name: Address: Address: City-St-Zip:	()Change()Addition	

I hereby certify that the information supplied with this filing does not qualify 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: MICHAEL SZREJTER DP 03/19/2009