2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P00000031029

1. Entity Name

U.S. FEDERATION OF TOYAMA RYU BATTO JUTSU, INC.



FILED Jan 25, 2006 08:00 AM Secretary of State

Principal Place of Business

Mailing Address

1646 E. COLONIAL DR. ORLANDO, FL 32803 1646 E. COLONIAL DR. ORLANDO, FL 32803



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01162006

No Chg-P

CR2E034 (11/05)

4. FEI Number 59-3645251

Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

ELDER, JOHN R 1646 E. COLONIAL DR. ORLANDO, FL 32803

DO NOT WRITE IN THIS SPACE

					_
The above the obligat	named entity submits this statement for the plans of registered agent.	ourpose of changing its registere	d office or r	egistered agent, or b	oth, in the State of Florida. I am familiar with, and accept
SIGNATURE	Signatury, typed or printed name of registered egent and title	il applicable (NOTE: Registered	Agent signature	required when reinstating)	UATE
FILE NOWIII FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00		Election Campaign Finant Trust Fund Contribution.	cing	\$5.00 May Be Added to Fees	U00000400366 92/02/06-80001-006 150.00
TITLE NAME STREET ADDRESS CITY-ST-ZIP	OFFICERS AND DIRECT PD ELDER, JOHN R 1646 E. COLONIAL DR. ORLANDO, FL 32803	CTORS			
TITLE NAME STREET ADDRESS CITY-ST-ZIP					
TITLE NAME STREET ADDRESS CITY-ST-ZIP			DO NOT WRITE IN THIS SPACE		
TITLE NAME STREET ADDRESS CITY-ST-ZIP					
TITLE NAME STREET AODRESS CITY-ST-ZIP					
TITLE NAME STREET ADDRESS CITY-SI-DP					

12. I hereby certify that the information supplied with this filling does not qualify for the exemptions contained in Chapter 119. Florida Statutes. I further certify that the information inclicated 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 607, 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:

NATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTO

1/2/06

Daytime Phone #