

**2009 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT**

DOCUMENT# P02000100158

**FILED**  
**Jun 30, 2009**  
**Secretary of State****Entity Name:** TAE KWON DO CENTER OF SAN CARLOS PARK, INC.**Current Principal Place of Business:**27970 CROWN LAKE BLVD.  
6  
BONITA SPRINGS, FL 34135**New Principal Place of Business:****Current Mailing Address:**11113 N. RAMS HORN TRAIL  
ORO VALLEY, AZ 85737**New Mailing Address:**18601 BARTOW BLVD.  
FORT MYERS, FL 33967**FEI Number:** 42-1552792**FEI Number Applied For ( )****FEI Number Not Applicable ( )****Certificate of Status Desired (X)****Name and Address of Current Registered Agent:**TENN, LEON  
9130 KINGS COVE COURT  
FORT MYERS, FL 33967 US**Name and Address of New Registered Agent:**LINDSEY, ALYSON  
18601 BARTOW BLVD.  
FORT MYERS, FL 33967 US

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: ALYSON LINDSEY

06/30/2009

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: P ( ) Delete  
Name: TENN, LEON  
Address: 11113 N. RAMS HORN TRAIL  
City-St-Zip: ORO VALLEY, AZ 85737

Title: T ( ) Delete  
Name: TENN, MADELINE B  
Address: 11113 N. RAMS HORN TRAIL  
City-St-Zip: ORO VALLEY, AZ 85737

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: P (X) Change ( ) Addition  
Name: LINDSEY, ALYSON  
Address: 18601 BARTOW BLVD.  
City-St-Zip: FORT MYERS, FL 33967

Title: T (X) Change ( ) Addition  
Name: LINDSEY, CHARLES  
Address: 18601 BARTOW BLVD.  
City-St-Zip: FORT MYERS, FL 33967

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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ALYSON LINDSEY

P

06/30/2009

Electronic Signature of Signing Officer or Director

Date