2009 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 29, 2009
Secretary of State

DOCUMENT# P03000067795

Entity Name: OSPREY ATA BLACK BELT ACADEMY, INC.

Current Principal Place of Business:

1264 SOUTH TAMIAMI TRAIL
B-112
OSPREY, FL 34229

New Principal Place of Business:

507 LAUREL RD E
NOKOMIS, FL 34275

Current Mailing Address:

1264 SOUTH TAMIAMI TRAIL
B-112
OSPREY, FL 34229

New Mailing Address:

507 LAUREL RD E
NOKOMIS, FL 34275

FEI Number: 20-0048435 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

BLOOMFIELD, THOMAS A
113 TAVERNIER DR
NOKOMIS, FL 34275 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

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: P ( ) Delete
Name: BLOOMFIELD, THOMAS A
Address: 113 TAVERNIER DR
City-St-Zip: NOKOMIS, FL 34275

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

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: THOMAS BLOOMFIELD P 04/29/2009
Electronic Signature of Signing Officer or Director — Date