2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000169633

Entity Name: SHOTOKAN OF OCALA, INC.

OCALA, FL 34470 US

City-St-Zip:

FILED Feb 04, 2006 Secretary of State

Current Principal Place of Business:			New Principal Place of Business:		
850 NE 36	TH TERRACE				
SUITEC	L 34470 US				
OCALA, F	L 34470 OS	•			
Current Mailing Address:			New Mailing Address:		
850 NE 36	TH TERRACE				
SUITE F OCALA, F	L 34470 US	2			
,					
FEI Number	: 20-2128500	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent: Name and Address of New Registered Agent:					
	LI, MICHAEL L 7TH PLACE L US US				
	named entity s e of Florida.	submits this statement for the p	ourpose of changing its registered	d office or registered agent, or both,	
SIGNATUI	RE:				
	Electron	ic Signature of Registered Age	ent	 Date	
Election Car	npaign Financing	g Trust Fund Contribution ().			
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGE	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title:	P ()	Delete	Title:	() Change () Addition	
Name:	BIGANZOLI, MI		Name:		
Address: City-St-Zip:	4055 NE 17TH OCALA, FL 344		Address: City-St-Zip:		
2, O. 2.p.	2 37 127 1, 1 2 3 7		only of Lip.		
Title:	` '	Delete	Title:	() Change () Addition	
Name: Address:	BIGANZOLI, GE 4055 NE 17TH		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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: MICHAEL L. BIGANZOLI P 02/04/2006