

2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 759447

Entity Name: NATIONAL SPORT JUDO AND NATIONAL JUDO TRAINING CENTER, INC.**Current Principal Place of Business:**14621 S.W. 24TH STREET
DAVIE, FL 33325**Current Mailing Address:**14621 S.W. 24TH STREET
DAVIE, FL 33325**FEI Number: NOT APPLICABLE****Certificate of Status Desired:** Yes**Name and Address of Current Registered Agent:**COBB, MIKE
14621 S.W. 24TH STREET
DAVIE, FL 33325 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:**

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title	P
Name	COBB, MIKE
Address	14621 S.W. 24TH STREET
City-State-Zip:	DAVIE FL 33325

Title	D
Name	GORDON, LES
Address	5220 NW 55 BLVD. #107
City-State-Zip:	COCONUT CREEK FL 33073

Title	D
Name	CLARK, BUDDY
Address	17653 BRITTANY LN.
City-State-Zip:	HUNTINGTON BEACH CA 92647

Title	D
Name	COBB, CAROL
Address	14621 SW 24TH ST.
City-State-Zip:	FORT LAUDERDALE FL 33325

Title	D
Name	AGUILAR, JAMIE
Address	P.O. BOX 266144
City-State-Zip:	WESTON FL 33326

Title	D
Name	AGUILAR, ANDY
Address	942 LAFAYETTE PL.
City-State-Zip:	CHULA VISTA CA 91913

Title	DIRECTOR
Name	GENEREUX, BECKY
Address	14621 S.W. 24TH STREET
City-State-Zip:	DAVIE FL 33325

I hereby 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 all other like empowered.

SIGNATURE: MIKE COBB**PRESIDENT****04/17/2017**

Electronic Signature of Signing Officer/Director Detail

Date