2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 06, 2009
Secretary of State

DOCUMENT# 716980

Entity Name: APOLLO MOTORCYCLE CLUB, INC.

Current Principal Place of Business:

5958 WINDOVER WAY
TITUSVILLE, FL 32780 US

New Principal Place of Business:

Current Mailing Address:

P O BOX 402
SHARPES, FL 32959 US

New Mailing Address:

FEI Number: 23-7111764 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

MAHONE, T A MR.
5958 WINDOVER WAY
TITUSVILLE, FL 32780 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

OFFICERS AND DIRECTORS:

Title: PD ( ) Delete
Name: DOWNEY, KELLY
Address: 4600 ROSEHILL AVE.
City-St-Zip: TITUSVILLE, FL 32780

Title: VP ( ) Delete
Name: ROLLYSON, JAMES B MR.
Address: 1900 CALAMONDIN AVE.
City-St-Zip: COCOA, FL 32927

Title: T ( ) Delete
Name: MAHONE, T A
Address: 5958 WINDOVER WAY
City-St-Zip: TITUSVILLE, FL 32780

Title: SD ( ) Delete
Name: RIGGINS, BUCK
Address: 1515 HUNTINGTON #113
City-St-Zip: ROCKLEDGE, FL 32955

Title: SA ( ) Delete
Name: BORDELON, MARK
Address: 802 SANDERLING DR.
City-St-Zip: INDIALANTIC, FL 32903

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: VP (X) Change ( ) Addition
Name: MCKUNE, DANIEL B MR.
Address: 2440 SAINT PAUL DR.
City-St-Zip: TITUSVILLE, FL 32780 US

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

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

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

SIGNATURE: KELLY DOWNEY PD 04/06/2009

Electronic Signature of Signing Officer or Director — Date