757858

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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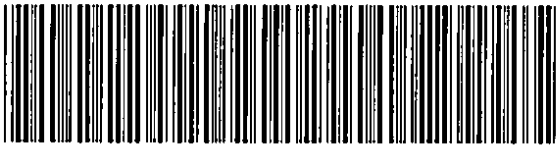


600385742856

DIVISION OF CORPORATIONS

5614 5/27/81 757855
006 26 30.00 DS
5614 5/27/81
006 26 5.00 DS
006 27 3.00 DS

NAME Richard R. McNamara

ADDRESS 258 Hampton Dr. S.C.

CITY Palm Bay STATE Fl ZIP CODE 32905

AREA CODE & PHONE NUMBER 305-724-9857

NAME OF CORPORATION ABATE OF FLORIDA, INC.

757858

FILED
MAY 6 10 02 AM
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FOR OFFICE USE ONLY

____ DOMESTIC	____ AMENDMENT	____ SEARCH
____ FOREIGN	____ DISSOLUTION	____ MERGER
____ PROFIT	____ REINSTATEMENT	____ MARK
✓ NON-PROFIT	____ ANNUAL REPORT	____ RESERVATION
____ LIMITED PARTNERSHIP	____ CERTIFICATE UNDER SEAL	✓ CERTIFIED COPY

NON-PROFIT CORP.

FILING $30
C. COPY 5
R. AGENT 3
538

WALK IN — WILL WAIT!
BALANCE DUE $
REFUND $

5-7

757858

PICKED UP

CORP 143
Rev. 1-79

FLORIDA — STATE OF THE ARTS

FILED
6 10 02 AM '81
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ABATE

757858

ARTICLES OF INCORPORATION

We, the undersigned, hereby associate ourselves together for the purpose of becoming incorporated under the laws of the State of Florida, Florida Statutes 617, applicable to corporations not for profit.

ARTICLE I

The name of the corporation shall be:
INC.
A.B.A.T.E. of Florida

ARTICLE II

The general purpose of this corporation shall be to form a united motorcycle riders' association, both at the individual local level as well as at the state level; to give the motorcyclist a united voice in regards to his/her future, his/her way of life, and dedicated to his/her freedom.

ARTICLE III

Qualification of members and their manner of admission shall be that they be 18 years of age and be approved by Members of the Board.

ARTICLE IV

The corporation shall have perpetual existance.

ARTICLE V

The names and residences of the subscribers of these Articles of Incorporation are as follows:

Charles Ocherman
P.O. Box 714
Hernando, FL 32642

Karl John Olsen
5311 Honore Ave.
Sarasota, FL 33583

Clay Moreland
4148 Winchester Lane
W. Palm Beach, FL 33406

Richard A. York
875 Hyland Ave.
Winter Haven, FL 33880

ARTICLE VI

The affairs of the corporation are to be managed by the officers of the corporation, who shall be elected at the first meeting of each calendar year.

ARTICLE VII

The names and addresses of the persons who are to serve as officers of the corporation are as follows:

Pres.	Mike Tuttle	
V-P	Michael Kiesling	2370 Iowa Drive Melbourne, FL 32935
Sec.	Maria L. Pease	1102 Seminole Drive Fort Pierce, FL 33454
Treas.	Constance Hinman	331 Crown Blvd. Melbourne, FL 32901

ARTICLE VIII

The corporation shall never have less than three (3) Directors. The names and addresses of the persons who are to serve as Directors until the first election shall be as follows:

David G. Marks	1102 Seminole Drive Fort Pierce, FL 33454
Thomas L. Owen	757 E. Carr Circle Palm Bay, FL 32905
Edward T. Hinman	331 E. Crown Blvd. Melbourne, FL. 32901

ARTICLE IX

Ammendments to the Articles of Incorporation may be proposed by any member of the corporation and adopted by a two-thirds (2/3) vote of the membership present at a regular meeting.

ARTICLE X

By-laws of the corporation may be made, altered, or recinded at any regular meeting with a two-thirds (2/3) vote of the membership present.

ARTICLE XI

The registered office of this corporation shall be 2416 S Harbor City Blvd.
P.O. Box MCL294, Melbourne, FL 32901, and the registered agent at that address shall be Gerald L. Perkins.

Signatures of Subscribers

Registered Agent

I hereby certify that on this 5th day of May, 1981 before me, a Notary Public duly authorized in the State of Florida to take acknowledgements, personally appeared the above, to me known to be the persons described as subscribers in and who executed the foregoing Articles of Incorporation, and acknowledged before me that they subscribed to these Articles of Incorporation.

Notary Public, State of Florida at large

My Commission expires:

Notary Public, State of Florida at Large
My Commission Expires June 13, 1982
Bonded By American Fire & Casualty Company

757858

DIVISION OF CORPORATIONS

NAME Billy Taylor

ADDRESS 15516 Martha Circle

CITY Lutz STATE FL ZIP CODE 33549

AREA CODE & PHONE NUMBER

NAME OF CORPORATION N.B.A.T.E. of Florida, Inc.

15516 Martha Circle

Lutz, FL 33549

Please change address of corp. as indicated above

FOR OFFICE USE ONLY

_____ DOMESTIC	_____ AMENDMENT	_____ SEARCH
_____ FOREIGN	_____ DISSOLUTION	_____ MERGER
_____ PROFIT	_____ REINSTATEMENT	_____ MARK
_____ NON-PROFIT	_____ ANNUAL REPORT	_____ RESERVATION
_____ LIMITED PARTNERSHIP	_____ CERTIFICATE UNDER SEAL	_____ CERTIFIED COPY
		_____ OTHER

TLV
12-2-81

PICKED UP

_____

FLORIDA – STATE OF THE ARTS

DUE DATE ON OR AFTER JANUARY 1 AND ON OR BEFORE JULY 1 OF EACH YEAR

CORPORATION ANNUAL REPORT

1982

FLORIDA DEPARTMENT OF STATE
DIVISION OF CORPORATIONS

Read Notice and Instructions on Other Side Before Making Entries
Filing Fee of $10 Required —Make Checks Payable To: *Secretary of State*

757858
A.B.A.T.E. INC. OF FLORIDA
15816 MARTHA CIRCLE
LUTZ, FLORIDA 33549

05/06/1981

~~MARKS, DAVID G~~	~~D~~	~~1102 SEMINOLE DRIVE~~	~~FT PIERCE,FL~~
~~OWEN, THOMAS L~~	~~D~~	~~757 E CARR CIRCLE~~	~~PALM BAY, FL~~
~~HINNAN, EDWARD T~~	~~D~~	~~331 E CROWN BLVD.~~	~~MELBOURNE, FL~~
~~TUTTLE, MIKE~~	~~P~~		
~~KIESLING, MICHAEL~~	~~V~~	~~2370 IOWA DRIVE~~	~~MELBOURNE, FL~~
~~PEASE, MARIA L~~	~~S~~	~~1102 SEMINOLE DRIVE~~	~~FT PIERCE, FL~~
~~K~~	~~T~~	~~331~~	
~~A~~	~~S~~	~~[illegible]~~	
[illegible]	F	15816 Martha Cir.	Lutz, FL
[illegible]	V	580 Illg. Rd.	Lutz, FL
[illegible]	D	400 Ferm St.	Jupiter, FL
[illegible]	T	3502 [illegible]	[illegible]

Registered Agent Information

PERKINS, GERALD L

2415 S HARBOR CITY BLVD.

MELBOURNE, FL 32901

$3.00 additional fee required for Registered Agent changes.

Billy M. Taylor, Jr.

29 June, 1982

813-971-3940

LETTER & CUS SENT
TR 12/20/93

REINSTATEMENT FILED 12/20/93

INVOLUNTARILY DI. SOLVED 11/10/93

A.B.A.T.E. INC. of Florida

DLS 6135 12/21/93

DLS 6135 12/21/93

REINSTATEMENT 15
CUS
REGISTERED AGENT 3
OVERPAYMENT
72 Privilege Tax
73 Annual Report
74 Annual Report
75 Annual Report
76 Annual Report
77 Annual Report
78 Annual Report
79 Annual Report
80 Annual Report
81 Annual Report
82 Annual Report
83 Annual Report 10
TOTAL 28
REFUND

NAME AVAILABLE
REINSTATED BY TR 12/20/93
UPDATER DL 12/20/93
UPDATER VERIFYER TR 12/20/93

757858

ANNUAL REPORT

1983

Read Notice and Instructions on Other Side Before Making Entries
Filing Fee of $10 Required — Make Checks Payable To Secretary of State

757858
A.B.A.T.E. INC. OF FLORIDA
15816 MARINA CIRCLE
LUTZ, FLORIDA 33549

1102 Columbus Avenue
Lehigh Acres,
Florida 33936

05/06/1981 | 07/20/1982

CAMPBELL, JAMES E	D	400 FERN STREET	JUPITER, FLORIDA 0000
Stewart, Marion	P p	1102 Columbus Ave/	Lehigh, Florida 33936
Stewart, Lynda	T	1102 Columbus Ave.	Lehigh, Florida 33936
Bohn, David	D	2723 17th St. E.	Palmetto,Fla.
Casey, Michael	D	19121 N.E. 25th Ave.	Ojus,Florida 33180
OcKerman, Charles	D	2802 Madison St.	Inverness,Fla. 33540
OcKerman, Vicki	S	2808 Madison St.	Inverness,Fla. 33540
Salmonsen, Rick	V	1528 Live Oak Dr.	Jacksonville,Fla.

Registered Agent Information

PERKINS, GERALD L
2415 S HARBOR CITY BLVD.
MELBOURNE, FL 32901

A. Karl Stevens
591 Luzon Ave.
Tampa, Fla. 33606

October 27, 1983

$3.00 additional fee required for Registered Agent changes

a. 12/20/83

Vicki Ockerman Secretary

22 September 1983

Up-dated by Lynda Stewart, Treas. 12-6-83 (Tele.#813-369-5175) Lynda Stewart

DUE DATE ON OR AFTER JANUARY 1 DELINQUENT AFTER JULY 1 OF EACH YEAR

CORPORATION ANNUAL REPORT 1984

FLORIDA DEPARTMENT OF STATE
George Firestone
Secretary of State
DIVISION OF CORPORATIONS

DO NOT write in this SPACE

FILED

JUN 18 9 03 AM '84

◄ Read Notice and Instructions on Other Side Before Making Entries

Filing Fee of $10 Required — Make Checks Payable To: *Secretary of State*

1. Name and Address of Corporation Principal Office:

757858
A.B.A.T.E. INC. OF FLORIDA
1102 COLUMBUS AVE.
LEHIGH ACRES, FL 33936

If above address is incorrect in any way, enter the correct address in Item 2. Include Zip Code.

2. Enter Change of Address of Corporation Principal Office, P.O. Box Number Alone is NOT Sufficient

Street Address

P.O. Box No. 005 1492 6/21/84

City 10.00

State Zip Code

3. Date Incorporated or Qualified To Do Business in Florida 05/06/1981

4. Federal Employer Identification Number (FEIN)

5. Date of Last Report 12/20/1983

*6. Names and Street Addresses of Each Officer and Director, as of December 31, 1983

	Names of Officers and Directors	Title	Street Address of Each Officer and Director (Do NOT Use Post Office Box Numbers)	City and State
1	STEWART, MARION	P	1102 COLUMBUS AVE.	LEHIGH ACRES, FL
2	STEWART, LYNDA	T	1102 COLUMBUS AVE.	LEHIGH ACRES, FL
3	~~BOWN, DAVID~~	~~D~~	~~2723 17TH ST., E.~~	~~PALMETTO, FL~~
4	CASEY, MICHAEL	D	19121 NE 25TH AVE.	OJUS, FL
5	~~OGKERMAN, CHARLES~~	~~D~~	~~2602 MADISON ST.~~	~~INVERNESS, FL~~
6	~~OGKERMAN, VICKI~~	~~S~~	~~2602 MADISON ST.~~	~~INVERNESS, FL~~
	Campbell, JAMES	D	400 FERN ST.	JUPITER, FL
	SALMONSEN, Rick	V	1578 Live Oak Dr.	Jacksonville, FL

Registered Agent Information

7. Name and Address of Current Registered Agent

STEVENS, A. KARL
591 LUZON AVE.
TAMPA, FL 33606

8. Name and Address of New Registered Agent

Name

Street Address (Do NOT Use P.O. Box Number)

City, State and Zip Code

9. Pursuant to the provisions of Sections 607.034 and 607.037, Florida Statutes, the undersigned corporation, organized under the laws of the State of Florida, submits this statement for the purpose of changing its registered office or registered agent, or both, in the state of Florida.

Such change was authorized by resolution duly adopted by its board of directors on: _____

SIGNATURE _____ DATE _____
(Registered Agent Accepting Appointment)

$3.00 additional fee required for Registered Agent changes.

6.18.84

10. *See signature restrictions under instructions on reverse side of this form.*

I Certify That I Am An Officer of the Corporation, the Receiver or Trustee Empowered to Execute This Report as Required by Chapter 607, F.S. I Further Certify That I Understand My Signature On This Report Shall Have the Same Legal Effects As If Made Under Oath.

Signature	Date
Lynda C Stewart	6/10/84
Typed Name of Signing Officer	**Title**	**Telephone Number**
LYNDA C STEWART	TREASURER	813-364-5175

11. *Should you desire a certificate of status check the box below and include an additional $5.00 with your payment.*

CERTIFICATE OF STATUS DESIRED X
$5 Additional fee required for certificates.

COR 620 (1-84)

FILED

Jun 18 9 03 AM '84

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

005 1492 6/21/84 5.00 6

005 1492 6/21/84 15.00 1L

Sent 6-18-84 MM

REINSTATEMENT
CUS
72 Privilege Tax
73 Annual Report
74 Annual Report
75 Annual Report
76 Annual Report
77 Annual Report
78 Annual Report
79 Annual Report
80 Annual Report
81 Annual Report
82 Annual Report
TOTAL
Bal. Due
Refund

5.

10.00

15.00

D57858

90 DAY NOTICE OF INTENT TO DISSOLVE

CORPORATION

ANNUAL REPORT
1985

FLORIDA DEPARTMENT OF STATE
George Firestone
Secretary of State
DIVISION OF CORPORATIONS

APPROVED
AND
FILED

SEP 11 AM 9:33

Read Notice and Instructions on Other Side Before Making Entries

Filing Fee of $20 Required — Make Checks Payable To: *Secretary of State*

1. Name and Address of Corporation Principal Office

757858
A.R.A.T.E. INC. OF FLORIDA
1102 COLUMBUS AVE.
LEHIGH ACRES, FL 33936

If above address is incorrect in any way, enter the correct address in item 2. Include Zip Code.

2. Enter Change of Address or Principal Office (P.O. Box Not Acceptable)
Street Address
P.O. Box No.
City and State
Zip Code

3. Date Incorporated or Qualified To Do Business in Florida: 05/06/1981

4. Federal Employer Identification Number (FEIN): 59-2427359

5. Date of Last Report: 06/18/1984

6. Names and Street Addresses of Each Officer and Director as of December 31, 1984

Names of Officers and Directors	Title	Street Address of Each Officer and Director (Do NOT Use Post Office Box Numbers)	City, State and Zip Code
~~STEWART, MARION~~	~~P~~	~~1102 COLUMBUS AVE.~~	~~LEHIGH ACRES, FL~~
STEWART, LYNDA	T	1102 COLUMBUS AVE.	LEHIGH ACRES, FL 33936
~~SALMONSEN, RICH~~	~~V~~	~~3578 LIVE OAK DR.~~	~~JACKSONVILLE, FL~~
CASEY, MICHAEL	S P	19121 NE 25TH AVE. Apt A	OJUS, FL 33180
CAMPBELL, JAMES	D	~~488 FERN ST.~~ 219 Wandering Trail	~~JUPITER, FL~~ Jupiter, FL 33458
Mary DiCenzo	V	1217 CASEDALE ST	LEHIGH ACRES, FL 33936

Registered Agent Information

7. Name and Address of Current Registered Agent

~~STEVENS, A. KARL~~
~~595 LUZON AVE.~~
~~TAMPA, FL~~ 33606

8. Name and Address of New Registered Agent

Name of
DAVID PICOU
Street Address (Do NOT Use P.O. Box Number) of
590 WILSKY RD
City and State of
LAND-O-LAKES, FL
Zip Code of
33539

9. Pursuant to the provisions of Section 607.034 and 607.037, Florida Statutes, the above-named corporation, organized under the laws of the State of Florida, submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.
Such change was authorized by resolution duly adopted by its board of directors on 24 July, 1985

I hereby accept the appointment of registered agent. I am familiar with, and accept the obligations of, Section 607.325, Florida Statutes.

SIGNATURE _____ DATE 7-29-85
(Registered Agent Creating Appointment)

$3.00 additional fee required for Registered Agent changes.

10. See signature instructions under instructions on reverse side of this form.
I Certify That I Am An Officer of the Corporation, the Manager or Trustee Empowered to Execute This Report as Required by Chapter 607.326.
I Further Certify That Information Given On This Report Shall Have the Same Legal Effects As If Made Under Oath.
Officer signing must be listed in Item 6.

Signature: Lynda C Stewart
Date: 31 July 85

Typed Name of Signing Officer: LYNDA C. STEWART
Title: TREASURER
Telephone Number: 813-369-5175

11. Should you desire a certificate of status, check the box. CERTIFICATE OF STATUS DESIRED ☐

$5 additional fee required for a Certificate of Status

CR2E031 (1/85)

FILE NOW! ANNUAL REPORT DELINQUENT AFTER JULY 1ST. APPROVED

CORPORATION

ANNUAL REPORT

1988

FLORIDA DEPARTMENT OF STATE
Jim Smith
Secretary of State
DIVISION OF CORPORATIONS

DO NOT WRITE IN THIS SPACE

Filing Fee of $25 Required — Make Checks Payable To: Secretary of State

1. Name and Address of Corporation Principal Office.

757858 6
A.B.A.T.B. INC. OF FLORIDA
~~1102 COLUMBUS AVE.~~
~~LEHIGH ACRES, FL 33936~~

If above address is incorrect in any way, enter the correct address in item 2. Include Zip Code

2. Enter Change of Address of Corporation Principal Office. P.O. Box Number Alone is NOT Sufficient

Street Address 21: 13438 3rd St SE
P.O. Box No. 22:
City and State 23: FORT MYERS, FL
Zip Code 24: 33905

3. Date Incorporated or Qualified To Do Business in Florida	4. Federal Employer Identification Number (FEI#)	5. Date of Last Report
05/06/1981	59-2427359	07/03/1987

6. Names and Street Addresses of Each Officer and Director as of December 31, 1987

Names of Officers and Directors	Title	Street Address of Each Officer and Director (Do NOT Use Post Office Box Numbers)	City and State
STEWART, MARION H.	PTS	1102 COLUMBUS AVE.	LEHIGH ACRES, FL
~~ST LAWRENCE, JEANNY L~~	~~S/D~~	233 Chipola Ave	DELAND, FL
~~GRAHAM, LINDA~~	~~S~~	~~1102 COLUMBUS AVE.~~	~~LEHIGH ACRES, FL~~
SCHULZE, MYRA	PTREAS	13438 3RD AVE. S.E.	FT. MYERS, FL.
KEMPERT, HERB	VP/D	WISPERING PINES #3-2	BIG PINE KEY, FL
LA PLANTE, EDWARD	V	3023 DREWERY AVE	LAKELAND, FL
~~GRANTHAM, JERRY~~	~~V~~	~~301 DIAMOND ACRES~~	~~DAVENPORT, FL~~

REGISTERED AGENT INFORMATION

7. Name and Address of Current Registered Agent

PICOU, DAVID
590 WILSKY RD
LAND-O-LAKES, FL 33539

8. Name and Address of New Registered Agent

Name 81:
Street Address 1 (Do NOT Use P.O. Box Number) 82:
Street Address 2 (Do NOT Use P.O. Box Number) 83:
City and State 84: FL
Zip Code 85:

9. Pursuant to the provisions of Sections 607.034 and 607.031, Florida Statutes, the above named corporation, incorporated under the laws of the State of Florida, submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.
Such change was authorized by resolution duly adopted by its board of directors on _____

I hereby accept the appointment of registered agent. I am familiar with, and accept the obligations of, Section 607.325 F.S.

SIGNATURE _____ DATE _____
(Registered Agent Accepting Appointment)

10. If a foreign corporation, state first transaction of business in Florida: _____

11. See signature restrictions under instructions on reverse side of this form.

I Certify That I Am An Officer or Director of the Corporation, the Receiver or Trustee Empowered to Execute This Report as Required by Chapter 607 F.S.
I Further Certify That I Understand My Signature On This Report Shall Have the Same Legal Effects As If Made Under Oath.
(Officer or Director signing must be listed in Item 6.)

Signature	Date
Marion H. Stewart	
Typed Name of Signing Officer or Director: MARION STEWART	Title: TRUSTEE
	Telephone Number: 813-369-5175

12. Should you desire a certificate of status, check the box: CERTIFICATE OF STATUS DESIRED ☐

$55 Additional Fee Required for a Certificate of Status

CRE604 (1-88)

FILE NOW! ANNUAL REPORT DELINQUENT AFTER JULY 1ST

CORPORATION

ANNUAL REPORT

1989

FLORIDA DEPARTMENT OF STATE
Jim Smith
Secretary of State
DIVISION OF CORPORATIONS

DO NOT WRITE IN THIS SPACE

Read Notice and Instructions on Other Side Before Making Entries

Filing Fee of $35 Required — Make Checks Payable To: Secretary of State

1. Name and Address of Corporation Principal Office

ZIP + 4

757858 6
A.B.A.T.E. INC. OF FLORIDA
13438 3RD ST. SE
FT MYERS, FL. 33905-2110

2. Enter Change of Address of Corporation Principal Office. P.O. Box Number Alone is NOT Sufficient

Street Address

P.O. Box No.

City and State

Zip Code

05/06/1981		59-2427359	08/11/1986

T	~~STEWART, MARION M.~~	~~1102 COLUMBUS AVE.~~	~~LEHIGH ACRES, FL~~
S/D	ST. LAWRENCE, JENNY L.	233 CHIPOLA AVE.	DELAND, FL.
T/D	SCHULZE, MYRA	13438 3RD AVE. S.E.	FT. MYERS, FL.
P/D	KEMPERT, HERB	WISPERING PINES #3-2	BIG PINE KEY, FL
V	LAPLANTE, EDWARD	3023 DREWERY AVE.	LAKELAND, FL.

REGISTERED AGENT INFORMATION

Name and Address of Current Registered Agent

PICCU, DAVID
590 WILSKY RD 34639
LAND-O-LAKES, FL ~~33539~~

FL.

SIGNATURE

DATE 2-14-89

Signature

Date

Myra J. Schulze Treasurer 813/693-6135

CERTIFICATE OF STATUS DESIRED

$5 Additional Fee Required for a Certificate of Status

FLA DEPT OF STATE-DIV OF CORP 904-487-6012 Nov 7 90 10:59 No.003 P.03

FILE NOW! LATE REPORT MUST BE FILED BY NOVEMBER 1, 1990 OR CORPORATION WILL BE DISSOLVED. FEE TO REINSTATE IS $296.25

APPROVED

CORPORATION

ANNUAL REPORT

1990

FLORIDA DEPARTMENT OF STATE
Jim Smith
Secretary of State
DIVISION OF CORPORATIONS

DO NOT WRITE IN THIS SPACE

FILED
1990 NOV -9 PM 4:58

Filing Fee of $35 Required - Make Checks Payable To: Secretary of State

1. Name and Address of Corporation's Principal Office.

757858

ABATE OF FLA. INC.
1015 COMBEE RD. N.
LAKELAND, FLORIDA 33801

If the address is incorrect in any way enter the correct address in item 2 below, including the Zip Code.

2. If Address in Block 1 is incorrect in any way, enter the correct address below. P.O. Box number alone is NOT sufficient. The NAME of the corporation can be changed only by filing an amendment.

Street Address (Do NOT use P.O. Box Number)

P.O. Box No.

City and State

Zip Code

3. Date Became, or Will Become Authorized To Do Business in Florida: 5/6/81

4. FEI Number: 59-2427359

FEI Number Applied For
FEI Number Not Applicable

5. Names and Street Addresses of Each Officer and Director (Do not use any abbreviation table or Post Office Box to cover over incorrect information.)

Title	Name of Officers & Directors	Street Address of Each Officer and Director (Do NOT Use Post Office Box Numbers)	City and State
PRES D	Edward LaPlante	1015 Combee Rd N.	Lakeland Florida 33801
V.P. D	CHARLES OCKERMAN	1401 Claymore St.	Inverness, Florida 32650
TREAS D	LISA MENDLETON	11018 Skew Lee Rd.	Thonotassa, Florida 33592
SECT D	BEATTY LAPLANTE	1015 Combee Rd N.	Lakeland, Florida 33801

RV 11-09-90

REGISTERED AGENT INFORMATION

7. Name and Street Address of Current Registered Agent

DAVID PICOU
590 WILSKY Rd.
LAND O'LAKES, FLA. 34639

8. Name and Address of New Registered Agent

Name (B)
EDWARD LAPLANTE
Street Address 1 (Do NOT Use P.O. Box Number) (B)
1015 COMBEE RD N.
Street Address 2 (Do NOT Use P.O. Box Number) (B)
LAKELAND, FLORIDA
City and State
FL.
Zip Code (B)
33801

9. Pursuant to the provisions of Sections 607.034 and 617.037, Florida Statutes, the above-named corporation, incorporated under the laws of the State of Florida, submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by a resolution duly adopted by its board of directors on October 13, 1990

I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.325 F.S.

SIGNATURE: Edward La Plante (Required if agent is appointed)
DATE: Oct 13, 1990

10. I certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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, F.S.

Signature: Edward La Plante
Date: Nov 7, 1990

Typed Name of Signing Officer or Director: EDWARD LAPLANTE
Title: President
Telephone Number: 646-7106

11. Should you desire a certificate of status check the box.

CERTIFICATE OF STATUS DESIRED ☒

$5 Additional Fee required for Certificate of Status

FILE NOW! CORPORATE STATUS WILL BE DELINQUENT AFTER JULY 1ST.

CORPORATION ANNUAL REPORT 1991

FLORIDA DEPARTMENT OF STATE
Jim Smith
Secretary of State
DIVISION OF CORPORATIONS

APPROVED
FL. DEPT. OF STATE
CORPORATIONS DIV
TALLAHASSEE, FL.
FILED
FEB-8'91

Read Instructions on Other Side Before Making Entries

FILING FEE OF $61.25 REQUIRED

DO NOT WRITE IN THIS SPACE

1. Name and Mailing Address of Corporation DOCUMENT #757858 (6)

ZIP + 4 PRESORT

A.B.A.T.E. INC. OF FLORIDA
1015 COMBEE RD. N.
LAKELAND, FLORIDA 33801-8100

If above address is incorrect in any way, enter the correct address in item 2. Include Zip Code.

2. If Address in Block 1 is incorrect in any way, enter the correct address below. P.O. Box is acceptable. The NAME of the corporation can be changed only by filing an amendment.

21 Street Address

22 P.O. Box No.

23 City and State

24 Zip Code

3. Date Incorporated or Qualified To Do Business in Florida: 05/06/1981

4. FEI Number: 59-2427359

FEI Number Applied For

FEI Number Not Applicable

5. $8.75 Additional Fee required for a Certificate of Status

CERTIFICATE OF STATUS DESIRED ☑

6. Names and Street Addresses of Each Officer and Director (Do not use any correction tape or fluid to cover over incorrect information.)

	1 Title	2 Names of Officers and Directors	3 Street Address of Each Officer and Director (Do NOT Use Post Office Box Numbers)	4 City and State
1	P/D	LAPLANTE, EDWAR	1015 COMBEE RD N.	LAKELAND, FL
2	V/P/D	OCKERMAN, CHARLES	1401 CLAYMORE STREET	INVERNESS, FL.
3	T/D	MENDLETON, LISA	11018 SKEW LEE RD	THONOTASSA, FL
4	S	LAPLANTE, BEATTY	1015 COMBEE RD N.	LAKELAND, FL.
5				
6				

REGISTERED AGENT INFORMATION

7. Name and Address of Current Registered Agent

LAPLANTE, EDWARD
1015 COMBEE RD N.
LAKELAND, FL 33801

8. Name and Address of New Registered Agent

81 Name

82 Street Address 1 (Do NOT Use P.O. Box Number)

83 Street Address 2 (Do NOT Use P.O. Box Number)

84 City FL.

85 Zip Code

9. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors.

I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of Section 607.0505, Florida Statutes.

SIGNATURE ______________________ DATE ________
(Registered Agent Accepting Appointment)

10. I certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath. I further certify 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 in Block 6 or on an attachment with an address.

SIGNATURE *Edward La Plante* DATE ________

Typed Name of Signing Officer or Director | Title | Telephone Number Daytime ( )

FILING FEE OF $61.25 REQUIRED — Make Checks Payable To: Secretary of State | $8.75 Additional Fee required for a Certificate of Status

FILE NOW! CORPORATE STATUS WILL BE DELINQUENT AFTER JULY 1ST.

CORPORATION ANNUAL REPORT 1992

FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

APPROVED
DEPT. OF STATE
CORPORATIONS DIV.

FILING FEE $61.25 Make Payable To: Secretary of State

1. Name and Mailing Address of Corporation DOCUMENT #757858 (6)

A.B.A.T.E. INC. OF FLORIDA
1015 COMBEE RD. N.
LAKELAND FL 33801-8100

21 Mailing Address

22 P.O. Box No.

23 City and State | 24 Zip Code

3 Date Incorporated or Qualified To Do Business in Florida 05/06/1981

3a. Date of Last Report 02/08/1991

4. FEI Number 59-2427359

5. $8.75 Additional Fee Required for a Certificate of Status — CERTIFICATE OF STATUS DESIRED X

6. Names and Street Addresses of Each Officer and Director

Title	Name of Officers and Directors	Street Address of Each Officer & Director	City and State
P/D	LAPLANTE, EDWAR	1015 COMBEE RD N.	LAKELAND, FL
V/P/D	OCKERMAN, CHARLES	1401 CLAYMORE STREET	INVERNESS, FL.
~~T/D~~	~~MENDLETON, LISA~~	~~11010 SKEW LEE RD~~	~~THONOTASSA, FL~~
S	LAPLANTE, BEATTY	1015 COMBEE RD N.	LAKELAND, FL.
T/D	ROTH, CHUCK	7971 Sagebrush Pl.	Orlando, FL

REGISTERED AGENT INFORMATION

7. Name and Address of Current Registered Agent

LAPLANTE, EDWARD
1015 COMBEE RD N.
LAKELAND, FL 33801

8. Name and Address of New Registered Agent

81 Name: STEVEN D. TISHLER
82 Street Address: 1138 South University Dr.
83 SUITE 209
84 City: FT. LAUDERDALE FL. 85 Zip: 33324

9. [illegible]

Date 3-5-92

10. [illegible] X

11. [illegible]

SIGNATURE X Edward La Plante Date 3-5-92

Edward LaPlante | PRESIDENT | 813 646-7106

12. [illegible]

April 30,1992

To Whom It May Concern;

I am writing to inform you of the change in our Board of Director's. Lisa Meddleton is no longer on the Board. Please put Chuck Roth in her place. Chuck's address is as follows: Chuck Roth
7971 Sagebrush Pl.
Orlando, Florida 32822
Please make the necessary changes.

Respectfully
Beatty LaPlante
Beatty LaPlante
Secretary

CHUCK ROTH
7971 SAGEBRUSH PL.
ORLANDO, FL. 32822

File Now. Filing Fee after May 1 is $225.00

CORPORATION ANNUAL REPORT 1993

FLORIDA DEPARTMENT OF STATE
Jim Smith
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 757858 (6)

A.B.A.T.E. INC. OF FLORIDA
1015 N COMBEE RD
LAKELAND FL 33801-8100

05/06/1991

06/30/1992

592427359

FILING FEE $700.00

ANNUAL REPORT $61.25 + $138.75 CORPORATION SUPPLEMENTAL FEE
MAKE CHECK PAYABLE TO DEPARTMENT OF STATE

$200.00

$5.00 Mail Out Added to Fees

$138.75 Supplemental Fee Not Received

9. Name and Address of Current Registered Agent

TISHLER, STEVEN D
1138 S UNIVERSITY DR, STE 209
FT LAUDERDALE FL 33324

10. Name and Address of New Registered Agent

FL

12. OFFICERS AND DIRECTORS

P/D
~~LAPLANTE, EDGAR~~
~~1015 COMBEE RD N.~~
~~LAKELAND FL~~

V/P/D
~~OCKERMAN, CHARLES~~
~~1401 CLAYMORE STREET~~
~~INVERNESS FL~~

T/D
~~ROTH, CHUCK~~
~~7071 SAGEBRUSH PL~~
~~ORLANDO FL~~

S
LAPLANTE, BEATTY
1015 COMBEE RD N.
LAKELAND FL

13. OFFICERS AND DIRECTORS (CONT'D)

Carlson, Jay
120 S.E. 1st St. Apt 4
Boynton Beach, FL 33435-4561

Mares, Whitey
4913 Regina Dr.
Ft. Pierce, FL. 34982

Harper, Debra
1340 Wilkinson Dr.
Plant City, FL 33567

SIGNATURE Jay Carlson 4/17/93

JAY CARLSON PRESIDENT 813-737-4914

FILE NOW! ANNUAL REPORT DELINQUENT AFTER JULY 1, 1987

CORPORATION

ANNUAL REPORT

1987

FLORIDA DEPARTMENT OF STATE
George Firestone
Secretary of State
DIVISION OF CORPORATIONS

DO NOT WRITE IN THIS SPACE

87 JUL -3 ...

Read Notice and Instructions on Other Side Before Making Entries
Filing Fee of $25 Required — Make Checks Payable To: Secretary of State

1. Name and Address of Corporation Principal Office

757858
A.B.A.T.E. INC. OF FLORIDA
1102 COLUMBUS AVE.
LEHIGH ACRES, FL 33936

If above address is incorrect in any way, enter the correct address in item 2. Include Zip Code.

2. Enter Change of Address of Corporation Principal Office, P.O. Box Number Alone Is NOT Sufficient

Street Address 21

P.O. Box No 22

City and State 23

Zip Code 24

3 Date Incorporated or Qualified To Do Business in Florida	4 Federal Employer Identification Number (FEIN)	5 Date of Last Report
05/06/1981	59-2427359	05/26/1986

6 Names and Street Addresses of Each Officer and Director as of December 31, 1986

Names of Officers and Directors	Title	Street Address of Each Officer and Director (Do NOT Use Post Office Box Numbers)	City and State
STEWART, MARION H.	P	1102 COLUMBUS AVE.	LEHIGH ACRES, FL
STEWART, LYNDA	T	1102 COLUMBUS AVE.	LEHIGH ACRES, FL
SCHULZE, MYRA	S	13438 3RD AVE. S.E.	FT. MYERS, FL.
~~[illegible]~~	~~V~~	~~3823 EMERY AVE.~~	~~LAKELAND, FL~~
Kempert, HERB	V	Whispering Pines Block 3 lot 2 Watson Blvd - Ave B (P.O. Box 163 Summerland, FL 33042)	Big Pine Key, FL
JERRY GRANTHAM	Trustee	301 Diamond Acres	DAVENPORT, FL 33837

REGISTERED AGENT INFORMATION

7. Name and Address of Current Registered Agent

PICOLL DAVID
590 WILSKY RD
LAND-O-LAKES, FL 33539

8. Name and Address of New Registered Agent

Name 81

Street Address 1 (Do NOT Use P.O. Box Number) 82

Street Address 2 (Do NOT Use P.O. Box Number) 83

City and State 84 FL.

Zip Code 85

9. Pursuant to the provisions of Sections 607.034 and 607.037, Florida Statutes, the above-named corporation, incorporated under the laws of the State of Florida, submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by resolution duly adopted by its board of directors on ~~June 7, 1987~~

I hereby accept the appointment of registered agent. I am familiar with, and accept the obligations of, Section 607.325 F.S.

SIGNATURE ______________________ DATE ______
(Registered Agent Accepting Appointment)

$3.00 additional fee required for Registered Agent changes.

CR2E034 (1/86)

10 See signature restrictions under instructions on reverse side of this form.

I Certify That I Am An Officer of the Corporation, the Receiver or Trustee Empowered to Execute This Report as Required by Chapter 607 F.S. I Further Certify That I Understand My Signature On This Report Shall Have the Same Legal Effects As If Made Under Oath. (Officer signing must be listed in Block 6)

Signature	Date
Lynda C Stewart	June 7, 1987

Typed Name of Signing Officer	Title	Telephone Number
LYNDA STEWART	Treasurer	813-369-5775

11. Should you desire a certificate of status check the box

CERTIFICATE OF STATUS DESIRED ☐

$5 Additional Fee required for a Certificate of Status

DUE DATE ON OR AFTER JANUARY 1 DELINQUENT AFTER JULY 1 OF EACH YEAR

CORPORATION

ANNUAL REPORT

1986

FILED
DEPARTMENT OF STATE
George Firestone
Secretary of State
DIVISION OF CORPORATIONS

Read Notice and Instructions on Other Side Before Making Entries

Filing Fee of $20 Required — Make Checks Payable To: Secretary of State

1. Name and Address of Corporation Principal Office

757858 6
A.B.A.T.E. INC. OF FLORIDA
1102 COLUMBUS AVE.
LEHIGH ACRES, FL 33936

If above address is incorrect in any way, enter the correct address in item 2. Include Zip Code

2. Enter Change of Address of Corporation Principal Office. P.O. Box Number Alone is NOT Sufficient

Street Address 2

P.O. Box No. 22

City and State 23

Zip Code 24

3. Date Incorporated or Qualified To Do Business in Florida	4. Federal Employer Identification Number (FEI#)	5. Date of Last Report
05/06/1981	59-2427359	09/11/1985

6. Names and Street Addresses of Each Officer and Director, as of December 31, 1985

Names of Officers and Directors 1	Title 2	Street Address of Each Officer and Director (Do NOT Use Post Office Box Numbers) 3	City and State 4 5
~~DICENSO, MARY~~	~~VP~~	~~1219 CASCADE ST~~	~~LEHIGH ACRES, FL~~
STEWART, LYNDA	T	1102 COLUMBUS AVE.	LEHIGH ACRES, FL
~~CASEY, MICHEL~~	~~D~~	~~19121 NE 25TH AVE APT A~~	~~OJUS, FL~~
~~CARROLL, JAMES~~	~~D~~	~~219 UNLOADING TRAIL~~	~~JUPITER, FL~~
STEWART, Marion H	P	1102 Columbus Ave	LE HIGH ACRES, FL
SCHULZE, MYRA	S	13438, 3rd Ave SE	FT MYERS, FL
Ivey, DAN	V	3023 Drewery Ave	LAKELAND, FL 33803-4311

REGISTERED AGENT INFORMATION

7. Name and Address of Current Registered Agent

PICOU, DAVID
590 WILSKY RD
LAND-O-LAKES, FL 33539

8. Name and Address of New Registered Agent

Name 81

Street Address (Do NOT Use P.O. Box Number) 82

City and State 83: FL.

Zip Code 84

9. Pursuant to the provisions of Sections 607.034 and 607.325, Florida Statutes, the above-named corporation, incorporated under the laws of the State of Florida, submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.
Such change was authorized by resolution duly adopted by its board of directors on _____

I hereby accept the appointment of registered agent. I am familiar with, and accept the obligations of, Section 607.325, F.S.

SIGNATURE _____ DATE _____
(Registered Agent Accepting Appointment)

$3.00 additional fee required for Registered Agent changes.

10. See signature restrictions under instructions on reverse side of this form.
I Certify That I Am An Officer of the Corporation, the Receiver or Trustee Empowered to Execute This Report as Required by Chapter 607, F.S.
I Further Certify That I Understand My Signature On This Report Shall Have the Same Legal Effects As If Made Under Oath.
(Officer signing must be listed in Item 6)

Signature	Date
Lynda C. Stewart	6/17/86

Typed Name of Signing Officer	Title	Telephone Number
LYNDA C STEWART	TREASURER	813-369-6775

11. Should you desire a certificate of status check the box:

CERTIFICATE OF STATUS DESIRED ☐

$5 Additional Fee required for a Certificate of Status

CR2E043 (1-86)

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 10, 1994
AMOUNT DUE ON OR BEFORE 8/10/94: $225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: $375)

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
94 JUN 28 PM 12:33

CORPORATION ANNUAL REPORT 1994

FLORIDA DEPARTMENT OF STATE
Jim Smith
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 757858 (6)

1. Corporation Name
A.B.A.T.E. INC. OF FLORIDA

Mailing Address
~~1015 COMBEE RD. N~~
~~LAKELAND FL 33801~~

Principal Place of Business
~~1015 COMBEE RD. N~~
~~LAKELAND FL 33801~~

If above addresses are incorrect in any way, mark through incorrect information and enter correction below.

DO NOT WRITE IN THIS SPACE

2. Mailing Address: PO Box 585	2a. Principal Place of Business:
Suite, Apt. #, etc.: DeBary	Suite, Apt. #, etc.:
City & State: Florida	City & State:
Zip: 32713 County:	Zip: Country:

3. Date Incorporated or Qualified: 05/06/1981
3a. Date of Last Report: 05/01/1993
4. FEI Number: 59-2427359 — Applied For / Not Applicable
5. Certificate of Status Desired: $8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution. ☐ $5.00 May Be Added to Fees
7. Nonprofit with IRS 501(c)(3) Tax Exempt Status ☐
8. This corporation is not liable for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent
TISHLER, STEVEN D
1138 S UNIVERSITY DR, STE 209
FT LAUDERDALE FL 33324

10. Name and Address of New Registered Agent
Name: Tishler, Steven D.
Street Address (P.O. Box Number is Not Acceptable): 796 Duck Key Drive
City: Duck Key FL Zip Code: 33050

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, or Sections 617.0502 and 617.1508, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent and agree to act in this capacity. I am familiar with and accept the obligations of Section 607.0505 or 617.0505, Florida Statutes.

SIGNATURE ____________ DATE ______

12. OFFICERS AND DIRECTORS	
TITLE	P/D
NAME	CARLSON JAY
STREET ADDRESS	120 SE 1ST ST APT A
CITY-ST-ZIP	BOYNTON BEACH FL
TITLE	V/P/D
NAME	MARKS WHITE I
STREET ADDRESS	4913 REGINA DR
CITY-ST-ZIP	FT PIERCE FL
TITLE	T/D
NAME	HARPER DEBRA
STREET ADDRESS	1340 WILKINSON DR
CITY-ST-ZIP	PLANT CITY FL
TITLE	S
NAME	LAPLANTE, BEATTY
STREET ADDRESS	1015 COMBEE RD N.
CITY-ST-ZIP	LAKELAND FL

13. CHANGES TO OFFICERS AND DIRECTORS
See Attached

800000121848 8
-07/01/94--01065--021
****268.75 ****233.75

SM 6-28

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(n), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 or 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Elizabeth Sawyer — June 28, 1994
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — DATE

0182240

ABATE OF FLORIDA, INC
1994-1996 BOARD OF DIRECTORS.

State office:
ABATE of Florida, Inc.
PO Box 585
DeBary, Fl., 32713-0585
(407) 668-5006

President:
James "Doc" Reichenbach II
PO Box 712 N/A
Silver Springs, Fl., 34489-0712
(904) 625-6353

Vice President:
Tim Harper
1314 Wilkinson Dr.
Plant City, Fl., 33567
(813) 754-9714

Secretary:
Elizabeth "Boots" Sawyer
PO Box 685 N/A
DeBary, Fl., 32713-0685
(407) 668-9433

Treasurer:
Debra Harper
1314 Wilkson Dr.
Plant City, Fl., 33567
(813) 754-9714

Sergeant at arms:
Robert "Red" King
PO Box 92708 N/A
Lakeland, Fl., 33804-2708
(813) 680-1832, (407) 932-4892

Membership:
Linda Young
PO Box 540778 N/A
Merritt Island, Fl., 32954-0778
(407) 453-8361

PR/Communications:
Bill "Wild Bill" Kendall
PO Box 925 N/A
Tallevast, Fl., 34270-0925
(813) 921-7961, (813) 359-1973

Legislative liaison:
Jeff Baxla
PO Box 627 N/A
Waldo, Fl., 32694-0627
(904) 468-2731, work (904) 622-3660
FAX: (904) 622-6513

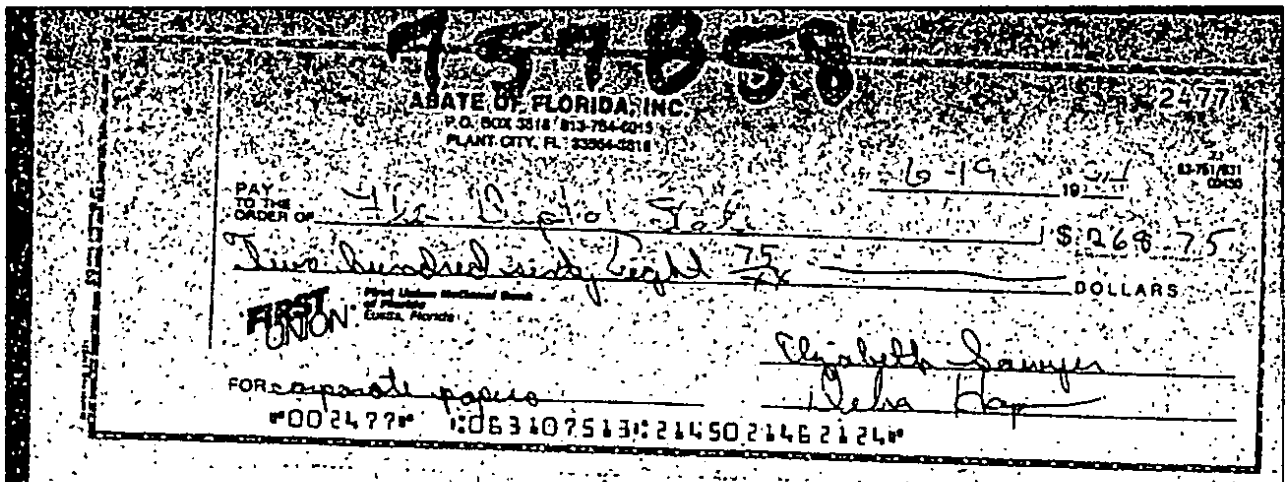
Masterlink Editor:
Bill "Wild Bill" Kight
2030 Ewell Rd.
Lakeland, Fl., 33811
(813) 646-7158, FAX (813) 759-0959

Products:
Diane "Squeeky" Bettmann
730 Hazel St., #4
Punta Gorda, Fl., 33950
(813) 639-8294

National Representatives:
James "Doc" Reichenbach II
PO Box 712
Silver Springs, Fl., 34489-0712
(904) 625-6353

Legal Council:
Steven D. Tishler, Attorney
786 Duck Key Drive
Duck Key, Fl., 33050
1-800-940-2453

Jeff Baxla
PO Box 627
Waldo, Fl., 32694-0627
(904) 468-2731, work (904) 622-3660
FAX (904) 622-6513


ABATE OF FLORIDA, INC.
P.O. BOX 3818 / 813-754-6015
PLANT CITY, FL 33564-3818

2477

PAY TO THE ORDER OF Fla Dept Rev $268.75

Two hundred sixty eight 75/100 DOLLARS

FIRST UNION

FOR corporate papers

Elizabeth Sawyer

Debra Hap

⑈002477⑈ ⑆063107513⑆ 2145021462124⑈

$35.00

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
94 JUN 28 PM 12:33

700001218437
-07/01/94--01065-021
****268.75 *****35.00

N/C
Jan
6-28

FLORIDA DEPARTMENT OF STATE
Jim Smith
Secretary of State

September 1, 1993

ABATE OF FLORIDA
P.O. BOX 3818
PLANT CITY, FL 33564-3818

SUBJECT: A.B.A.T.E. INC. OF FLORIDA
Ref. Number: 757858

We have received your document for A.B.A.T.E. INC. OF FLORIDA and check(s) totaling $35.00. However, your check(s) and document are being returned for the following:

Our records indicate the current name of the entity is as it appears on the enclosed computer printout. Please correct the name throughout the document.

Amendments for nonprofit corporations are filed in compliance with section 617.1006, Florida Statutes. Please see the attached information.

The amendment application your submitted is for use by profit corporations and cannot be used by your corporation.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (904) 487-6908.

Tawana McClellan
Corporate Specialist

Letter Number: 093A00130030

FLORIDA DEPARTMENT OF STATE
Jim Smith
Secretary of State

RECEIVED
JUN 29 AM 11:56
DIVISION OF CORPORATION

January 18, 1994

ABATE OF FLORIDA
P.O. BOX 3818
PLANT CITY, FL 33564-3818

SUBJECT: A.B.A.T.E. INC. OF FLORIDA
Ref. Number: 757858

We have received your document for A.B.A.T.E. INC. OF FLORIDA and check(s) totaling $96.25. However, your check(s) and document are being returned for the following:

You failed to make the correction(s) requested in our previous letter.

Amendments for nonprofit corporations are filed in compliance with section 617.1006, Florida Statutes. Please see the attached information.

The 1994 Corporation Annual Report is now due. Changes in the officers/directors and/or registered agent may be made of this form and submitted with the proper fee.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (904) 487-6908.

Tawana McClellan
Corporate Specialist

Letter Number: 494A00001869

ARTICLES OF AMENDMENT

to

ARTICLES OF INCORPORATION

of

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
94 JUN 28 PM 12:33

A.B.A.T.E. Inc. of FLORIDA

Pursuant to the provisions of section 617.1006, Florida Statutes, the undersigned corporation adopts the following articles of amendment to its articles of incorporation.

FIRST: Amendment(s) adopted:

ABATE of FLORIDA, INC.

SECOND: The date of adoption of the amendment(s) was: April 14, 1984

THIRD: Adoption of Amendment *(check one)*

☐ The amendment(s) was(were) adopted by the members and the number of votes cast for the amendment was sufficient for approval.

☒ There are no members or members entitled to vote on the amendment. The amendment(s) was(were) adopted by the board of directors.

ABATE OF FLORIDA, INC.
Corporation Name

Linda L. Easley
Signature of Chairman, Vice Chairman, President or other officer

LINDA L. EASLEY
Typed or printed name

State Secretary
Title

Date

FILE NOW: FILING FEE AFTER MAY 1 IS $155.00

CORPORATION ANNUAL REPORT 1995

FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

APPROVED AND FILED

95 APR 17 PM 4:07

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # 757858 (6)

1. Corporation Name
ABATE OF FLORIDA, INC.

Principal Place of Business	Mailing Address
P.O. BOX 585 DEBARY FL 32713	P.O. BOX 585 DEBARY FL 32713

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 05/06/1981
3a. Date of Last Report: 06/28/1994
4. FEI Number: 59-2427359 ☐ Applied For ☐ Not Applicable
5. Certificate of Status Desired ☐ $8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐ $5.00 May Be Added to Fees
7. Nonprofit with IRS 501(c)(3) Tax-Exempt Status ☐ $68.75 Supplemental Fee Not Required
8. This corporation has been for a period of at least 5 years. Florida Statutes ☐ Yes ☐ No

21. Principal Place of Business	26. Mailing Address
22. Suite, Apt. #, etc.	27. Suite, Apt. #, etc.
23. City & State	28. City & State
24. Zip / 25. County	29. Zip / 30. County

9. Name and Address of Current Registered Agent

TISHLER, STEVEN D
786 DUCK KEY DR.
DUCK KEY FL 33050

10. Name and Address of New Registered Agent

31. Name
32. Street Address (P.O. Box Number is Not Acceptable)
33.
34. City: FL 35. Zip Code

11. Pursuant to the provisions of Sections 607.1622 and 607.1508, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby certify that the corporation has registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE _____ DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS, CHANGES TO OFFICERS AND DIRECTORS
TITLE	P	D ☐ Change ☐ Addition
NAME	REICHENBACH, JAMES II	
STREET ADDRESS	P.O. BOX 712 N/A	
CITY ST ZIP	SILVER SPRINGS FL 34489-0712	
TITLE	S	D ☐ Change ☐ Addition
NAME	SAWYER, ELIZABETH	
STREET ADDRESS	P.O. BOX 685 N/A	
CITY ST ZIP	DEBARY FL	
TITLE	V	D ☐ Change ☐ Addition
NAME	HARPER, TIM	
STREET ADDRESS	1314 WILKINSON DR.	
CITY ST ZIP	PLANT CITY FL	
TITLE	T	D ☐ Change ☐ Addition
NAME	HARPER, DEBRA	
STREET ADDRESS	1314 WILKINSON DR.	
CITY ST ZIP	PLANT CITY FL 33567	
TITLE	SAA	T ☐ Change ☐ Addition
NAME	KING, ROBERT	
STREET ADDRESS	P.O. BOX 92708 N/A	
CITY ST ZIP	LAKELAND FL 33807-2708	
TITLE	M	V ☐ Change ☐ Addition
NAME	YOUNG, LINDA	
STREET ADDRESS	P.O. BOX 540778 N/A	
CITY ST ZIP	MERRITT ISLAND FL 32954-0778	

14. I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 12 or Block 13 if changed, added or deleted.

SIGNATURE: _____ ELIZABETH SAWYER MARCH 31, 1995 (407)668-5006
(SIGNATURE AND TYPED OR PRINTED NAME OF OFFICER OR DIRECTOR) (DATE) (TELEPHONE NUMBER)

050890

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 9, 1995.
AMOUNT DUE ON OR BEFORE 8/9/95: $158 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: $453)

NONPROFIT CORPORATION ANNUAL REPORT

Amended 1995

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

APPROVED AND FILED
95 OCT 23 PM 5:32
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # 757858

1. Corporation Name
ABATE OF FLORIDA, INC.

DO NOT WRITE IN THIS SPACE

Principal Place of Business	Mailing Address
P.O. BOX 585 DEBARY FL 32713	P.O. BOX 585 DEBARY, FL 32713

3. Date Incorporated or Qualified: 05/06/81
3a. Date of Last Report:
4. FEI Number: 59-3101979
Applied For / Not Applicable
5. Certificate of Status Desired: X — $8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution: ☐ — $5.00 May Be Added to Fees
7. Nonprofit with IRS 501(c)(3) Tax Exempt Status: ☐ — FILING FEE IS $61.25
8. The corporation has liability for intangible tax under s. 199.032, Florida Statutes: ☐ Yes ☐ No

2. Principal Place of Business	2a. Mailing Address
21	26
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27
City & State 23	City & State 28
Zip 24 / County 25	Zip 29 / County 30

9. Name and Address of Current Registered Agent

TISHLER, STEVEN D
786 DUCK KEY DR.
DUCK KEY FL 33050

10. Name and Address of New Registered Agent

31 Name
32 Street Address (P.O. Box Number or Not Acceptable)
33
34 City FL 35 Zip Code

11. Pursuant to the provisions of Sections 617.0501 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE _____ DATE
Signature required if this is a change of registered agent. Failure to sign will delay processing of annual report.

12. OFFICERS AND DIRECTORS		13. ADDITIONS, CHANGES TO OFFICERS AND DIRECTORS
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	P/D REICHENBACH, JAMES II PO BOX 712 SILVER SPRINGS, FL 34489-0712	800001645158 -11/27/95--01024--016 *****70.00 *****70.00
		S/D SAWYER, ELIZABETH 73 AZALEA RD. DEBARY, FL., 32713 — XX Change ☐ Addition
		V/D INGLIS, ALBERT 143 SW 29th TERR. CAPE CORAL FL 33914
		T/D BUCHHOLZ, CHARLES 73 AZALEA RD. DEBARY FL 32713 — XX Change ☐ Addition
		SAA/T KING, ROBERT PO BOX 450413 KISSIMMEE, FL., 34745-0413 — XX Change ☐ Addition
	M/T YOUNG, LINDA PO BOX 540778 NA MERRITT ISLAND, FL., 32954-0778	

CR2E037 (3/95)

14. I do hereby certify that the information indicated with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: ELIZABETH SAWYER — SEPT 5, 1995 (407)668-5006
SIGNATURE AND TYPED OR PRINTED NAME OF SOMEONE OTHER THAN DIRECTOR — DATE — DAYTIME TELEPHONE NUMBER

ABATE OF FLORIDA, INC.

P.O. BOX 585, DeBARY, FL., 32713-0585
Phone: (407) 668-5006
Fax: (407) 668-5006

SEPTEMBER 5, 1995

DIVISION OF CORPORATIONS
AMENDMENT DIVISION
PO BOX 6327
TALLAHASSEE, FL., 32314

To whom it may concern,

As of August 12, 1995 we have had two (2) changes in our Corporate Board of Directors. Our Vice President and our Treasurer.

Vice President	Treasurer
Albert Inglis	Charles Buchholz
143 SW 29th Terr.	73 Azalea Rd.
Cape Coral, FL., 33914	Debary, FL., 32713

Please make the necessary changes to our Nonprofit Corporation Papers. Enclosed is a copy of our meeting minutes when the changes occurred.

The FEI number has also been changed. Please find enclosed a copy from the Internal Revenue Service regarding this change. The new number is 59-3101979.

Enclosed is a check for $43.75 (forty three dollars and seventy five cents). $35.00 (thirty five dollars) to cover the amendment to the corporation papers and $8.75 (eight dollars and seventy five cents) for a Certificate of status.

If you have any questions regarding these matters please call the above number.

Thank you.

Sincerely,

Elizabeth Sawyer

Elizabeth Sawyer
ABATE OF FLORIDA, INC.
State Secretary

ABATE OF FLORIDA, INC.
STATE MEETING MINUTES AUGUST 12, 1995
LIGHTNING ALLEY CHAPTER HOSTING

Called to order 2:20 PM
Pledge said:

Alachua-Gordon & Ted
Brevard-Jerry & Reggie
Big Water-Bill & Robin
Citrus-Crow & Lenny
Caloosahatchee-Carl & Diana
Daytona Beach-John & Mac
Duval-Patty & Josh
Forest-Val & Alan
Gateway-Lyle & Cathy
Gator Alley-Sach & Ann
Gulf Coast-Bil & Hugh
Hillsborough-Richard & Abraham
Indian River-Frankie & Barbara
Inerstate-Tobby & Mean Gene
Lake-Garry & Pam
Levy-James & Shawn
Lightning Alley-Sarge & Lisa
Martin/Palm Beach-Deacon
North Coast-Mike & Jeff
Osceola-Tom & Sue
Panhandle-
Peace River-Leigh & Scott
Polk-L. Daniel & Pat
Putnam-George
Seminole-Jim & Rockie
Southeast-Fred & Demetrios
Southernmost-Marty & Keith
Southwest-Todd & Michelle
Suncoast-Buzz & Ron
Tri County-Animal & Caveman
West Coast-Kathy & Richard
White Sands-Rick & Willis

1 Chapter absent-Panhandle

Chapters losing 1 vote due to late or missing membership or treasury reports:Panhandle-1 vote membership, 1 vote treasury. Southwest-1 vote treasury.

Presidents report-"Doc" Reichenbach: I would like to thank everyone for showing up and thank Lighting Alley for hosting this meeting.
I made a mistake at the last meeting, when an officer leaves or resigns the State President can pick an officer to replace that officer and then at the next state meeting confirms it. I picked Jeff Avery to take over as PR for Bill Kendall. I neglected to have this confirmed. At this time I will put forth Jeff Avery as PR person. All those in favor, all opposed, Jeff Avery will be the PR person. Jeff not here today.
Letter of resignation read from Debra Harper. Under the by-laws I become the state treasurer. I do not want the job. I had named a assistant treasurer last meeting, Buck, he has been helping with this for the last week since she resigned. Under the by-laws I can not pick a State Treasurer. Deacon nominates Buck for treasurer to fulfil the term until 1996, seconded. Buck accepts this nomination. Is there any other nominations? None offered. All those in favor, all those opposed, Buck will now fulfill this position until June 1996.
Letter of resignation read from Tim Harper. The BOD has accepted this resignation. I have picked Bert Inglis from Caloosahatchee Chapter to fulfil the 10 month term. All those in favor, all those opposed, Bert is now the Vice President.
All treasury reports will go the State office.
At the last state meeting we put out about some chapters wanting to do motorcycle drawings. You had to ask the BOD if you could do it or not. The BOD has decided that we have no problem with people doing these, we do have a problem with how the money is used. Under the by-laws Section 8, paragraph H, The chapters will donate a minimum of 20% of all profits from any and all chapter profits. If you do an event for MDA or anything 20% goes to state for operating expenses. Discussion on chapters having large bank accounts and then saying that they owe nothing to state.

Everyone will start paying their fair share. More discussion on this subject. Chapters will be sent information on this. We are all in this together, we are ABATE OF FLORIDA, INC. not Chapter first then ABATE OF FLORIDA, INC. We are all one organization.
1993-1994 Federal taxes were paid.
All of you chapters have come to ABATE OF FLORIDA, INC. to become chapters: We did not recruit you, we did not ask you to join us. You came to us and were voted in as chapters. You agreed at that time to abide by the Constitution and By laws of ABATE OF FLORIDA, INC. We had a problem at the last meeting about a chapter slogan. I have talked to both Presidents of the chapters. Many opinions have been given on this problem. We are all in this together. I am tired of this fighting amongst ourselves. I have to do what is best for ABATE OF FLORIDA, INC. Under the powers of the Presidency this compromise will be adhered to. A Better Class of Trash will not be used on the front of Big Water newsletter. Nor will it be underneath ABATE OF FLORIDA, INC. name, nor will it be on stationary for official correspondence. They may use their slogan. This problem was tearing ABATE apart. There will be no more of this. We do not need to fight amongst ourselves over this or anything thing else like this. We have worked to hard to bring this organization this far.

VP REPORT-Bert Inglis: It will be hard to fill Tim's footsteps but I will do this to the best of my ability. I will do what I can for you all and help the State out at this level.

SECRETARIES REPORT-"Boots" Sawyer: In your chapter packets there is al little envelope from me, this envelope contains a listing of all your chapter meeting minutes from June 1994-June 1995. Please have your secretaries find and send to me any that I am missing.
Lynda Stewart has given to me a box of old files. One of the things in there was a key bob that we were looking for. Thank you to Lynda for finding this box.
Meeting notes from last State meeting are in your packets, I would like to make a motion to accept them. seconded, passed.

TREASURERS REPORT-Doc:as Buck has just stepped into this I will do this report. Savings:$38,768.91, Checking:$9,159.84.
No loans out at this time.
We already know who is losing votes for this meeting.
Fiscal year from June 1994-June 1995. We will be looking for original receipts etc. for this fiscal year for doing the taxes. You have really done good at getting us the information needed for 1993-1994 since we started calling. We appreciate it.
Send all Treasury reports to the State Office. They need to include all original receipts, bank statements and cancelled checks.
In Chapter envelopes there is a inventory that needs to be filled out. We need a complete inventory with yard sale prices.
Buck:on the treasury forms there are two line for products. One is for ABATE products the other is for Chapter products. You must pay 20% to the state for any chapter products sold.
Everything you own as a chapter needs to be on the Chapter inventory form.
Treasury report is in your packets. Motion to accept the treasury report, seconded, passes.

MEMBERSHIP REPORT-LINDA YOUNG: The report is attached to the membership list that goes back to your chapter membership person.
As of August 5, 1995 we have 4541 members, 665 Life members. This is up by 144 members over all.

We have a potential new chapter that would like to be voted in today. White Sands Chapter in the Panama City Beach area. They would like to come in with 22 new members and 7 transfers. Rick and Willie given a chance to say a little bit about why they want to come in as a chapter of ABATE. Motion to accept White Sands as a chapter of ABATE, seconded, discussion. Discussion on if Panhandle Chapter objects to this chapter coming in as they are so close? They were notified of the potential chapter coming in at this meeti[illegible]d they are not here today to speak. Call for the vote. All those in [illegible]or, opposed, motion passed. ABATE OF FLORIDA, INC.; White Sands Chapt[illegible], Ronnie Ruggles Chapter President (904)230-3852; 292 Powell Adams Rd, Panama City Beach, Fl., 32413.
Welcome to ABATE OF FLORIDA, INC.
Thank you to all the chapters that got their reports in on time for the last two months. The only chapter that has lost a vote for membership is Panhandle. Doc-Panhandle and South West lost votes for treasury reports. Everyone did a good job in getting their reports in.
Presidents Award to Brevard for 53 members, Southeast with 47 new members.
Honorable mention to Caloosahatchee with 44 new members, West Coast 42 new members and Alachua with 32 new members. You guys are doing great.
Certificates of Excellence to:Suzelle Miller of Lightning Alley Chapter and John Alexander of Polk County Chapter.
22 Life Cards handed out.
Motion to accept membership.

SECURITY REPORT-"RED" KING: We have another generator I will be picking up soon.
The generator that was broken during Bike Week will be fixed by next week.
I forgot to let the BOD know at it's earlier meeting that I now have an IBM computer, so all security can be put on computer.
Do what you can to get these inventories in so we can deal with these taxes.

PR/COMMUNICATIONS-"Doc":Jeff Avery is in Sutrgis.
Motorcycle Safety Director is also Jeff.
We have an honored guest here, Dave Picou. Instructor for Motorcycle Safety Program in Hillsborough County and serves on the Motorcycle Safety Committee. Dave:information on how the Motorcycle Safety Program is set up and who controls it. The sites are not picked by the state of Florida, they are picked by interest in that area. They would like to see a site within 50 miles of everyone, but they do not have the funds or instructors to do this. There are states where ABATE's run the Motorcycle Safety Program. I believe in rider training and put all my time into this.
Dave Picou, 2745 Wilsky Rd., Land O'Lakes, Fl., 34639, (813)949-1117
Happy Birthday to Dave. If ABATE OF FLORIDA, INC. wants to take over this program they will have to present it in a very neat package to the legislators. We need to keep a good eye on what the state does with this program. If you call 1-800-447-4700 they will give you the phone number of the closest motorcycle training course site. How to become an instructor? You have to be recommended by an existing instructor. I promote this [illegible] at my site, about 2,000 people have been trained on moto[illegible]t ABATE bought. ABATE presented a banner from Dave promoting the Motorcycle Safety Course.

LEGISLATIVE REPORT-JEFF BAXLA: handed out in your packet. In the month of Sept the Transportation Committee will meet and we will either win or lose on that day on HB 899.

You must get legislative information into your chapter newsletter on what you can do to help get HR 899 passed. Representative Tillie Fowler has finally spoken out in favor of our cause. We need more Representatives in Washington to be on our side. Contact your local Representative, phone, write or go to town meetings as they are going to be in their home districts for break. We want the language of HR 899 to be included in the National Highway System legislation.
Discussion on the redrawing of Legislative Districts for the State of Florida.

LOBBYIST REPORT-"DOC": The sponsor of our Helmet Bill in the Senate has some personal problems. We will be looking for another Senator to also sponsor our helmet bill.
Both bills are ready to go. I will introduce them in November and as soon as they have bill numbers I will let you know. By then the National Bills will have gone through. The helmet bill does say a full repeal for those 21 and over.

PRODUCTS REPORT: "Doc":Mouse has been in an accident and will not be here today.
Debbie Kight has been made the assistant products person as Mouse needs some assistance for now.
North Coast has a cancelled check for products ordered and never received the order. FAX order to Doc and he will take care of it.
Orders handed out.
We only have about 40 of the new patches left. We will be ordering more.
Discussion on doing a t-shirt for the Tallahassee Run. Discussion tabled until old business.

MASTERLINK-BILL KIGHT: Thank Tim for doing so much for the Masterlink. We will be needing help in putting the Masterlink out this next issue. We need to get more advertisers and sponsors.
Pam:suggested that only one Masterlink be sent to a household. Reply:we have been over this time and time again. It has been voted upon that every member receive a Masterlink as it is part of your dues. Take that extra Masterlink and go out and get a new member with it.
Questions on who gets the FAX's sent to the Masterlink.
Linda:The Masterlink labels come from the membership trustee. You will not receive a Masterlink if the address is wrong. Please make sure your address is correct with your chapter membership person.

COMMITTEE REPORTS
SOP(STANDARD OPERATING PROCEDURES)-DEMETRIOUS:we need two more weekends and then they will be on the BOD desk. The BOD will approve first then it will got to the delegates for approval.

BIKE WEEK-BOOTS:There are flyers in your packet.
Notice in your packet, if you do not put down your correct name and address on the volunteer work sheets your hours will not be counted.
Doc:the campground has put in fill dirt. Hopefully by March we will have a good campground.
Gene:is there any way that ABATE could purchase land for campground?
Doc:we have talked about this before. The biggest problem is the liability.
Someone had offered us a proposal on land. Unfortunately this proposal was to expensive. For the next two years we have a contract with the Fairgrounds.

BIKETOBERFEST:Doc-I signed the parade permits the other day. It leaves at

10:00, line up at 8:30AM. Starts at the lot next to the Hilton.
We are going to have the Welcome Center on Main St. again.
The hotel we use has been booked solid with ABATE people. If you call they will give you the number of the other hotels we will be using. We will party together.
Roy:question, if we sign up at the Welcome Center do the chapters get credit? Linda-what we did last year is if someone from your chapter helped at the Welcome Center to sign up people then the chapter would get credit.

NCOM:Doc-I have to go to a BOD meeting in Nov. Charlotte. Anyone from ABATE OF FLORIDA, INC. is welcome to attend. I will get you the information as soon as possible. Buzz does not know the dates either. They will be holding the Regional meetings there also.

Doc:beeper number-(407)455-2711. Don't forget to put your area code in.

MRF: Jeff already gave a report on Washington.
The MRF convention is the end of September. We normally give them $1,000.00 donation. Buzz-motion to give MRF $1,000.00 donation, seconded, passes.
We always send 2 representatives (Doc & Jeff) to this convention, it will cost about $1,000.00. Deacon-motion to send two representatives, seconded, passed.
Josh from Duval-brought up about how important it is to become a member of the MRF and what they do in Washington.

AMA-Doc-Boots needs a listing of events that the chapters are putting on in 1996 that need AMA insurance. If you are going to have any event of any size you need to get the insurance. She needs these dates by October 1995.
Biker Bob suggests to pick rain dates also.

OLD BUSINESS
APRIL 1996 RUN:we don't have a campground as yet. We will have one by the Oct. meeting. The monies collected for the motorcycle will go to pay for the campground. Discussion on who we are charging to get into the campground. It is supposed to be a free campground for all those that come. Discussion on whether just free to ABATE members or all.
Fred:motion to open the campground to anybody for the Tallahassee Run, seconded, discussion, passed.
Alan:motion to produce a t-shirt to commemorate this event, amend to $1.00 over cost, seconded, discussion, they will have the ABATE logo and ABATE OF FLORIDA, INC on the back of the shirts, call for the vote, passed.
Question on Lilac cards for this campground. These cards are being honored. People without cards are being charged for camping fees.
MOTORCYCLE DRAWING:need to turn in sold tickets and pick up some more. Drawing to be held Bike Week.
PRESIDENTS MEETING:January 13, 1996, flyer in your packet. Brevard County Chapter hosting. Presidents meetings are open to all who wish to attend.

NEW BUSINESS
OSCEOLA:Motion to request a loan of $1000.00 to fund the Turkey Shoot, November 17-19, 1995, amend to $1200.00, repayment schedule to the discretion of the state BOD, the State BOD has decided that repayment is to be immediately after the event, seconded, discussion, passed.
SEMINOLE:Motion to borrow $2000.00 for our Motorcycle Olympics on Sept 10 to be paid immediately after, seconded, discussion, passed.

GULF COAST: This motion to be taken back to the chapters. Motion to standardize all state wide ABATE materials (ie/t-shirts, letterhead, banners, etc) with the newly accepted State logo (on new patch) adding only chapter names. To be voted on at the next State meeting. Gulf Coast explains why they would like to see this in effect. We are ABATE OF FLORIDA, INC. and should be standardized to this. Doc:the eagle that we have on a lot of stuff is like a National logo that ABATE's use all over the Country. Each chapter will still be allowed to have their individual chapter logos on their banners. This will be for state products, not individual chapter products.
CITRUS: Crow:information given on Marble Run. We could have everybody go to each chapter meetings and collect marbles. These marbles will be different colors and assigned different values. A prize for the person. with the most marbles or points value wins.
SARGE: Lightning Alley suggests that each chapter establish a list of FAX number for each of the other chapters. Jeff-I have FAX numbers for contacting all but three chapters now. These will be published in the Masterlink.
SOUTHEAST: Fred:looking into renting an electric sign for the Run to the Keys. Possible cost of $500.00. Asking the state or the chapters to help finance this sign. Discussion. Deacon-motion that we give them the monies for the sign. Doc-if we pay for it we will control the messages on the sign. Motion seconded, discussion, location of sign discussed, motion has been made to pay $500.00 or less to put a sign at the entrance to the Keys with the state to control what the sign says, passes. Fred to let us know how much it will cost. State PR will decide what goes on the sign.

GOOD OF THE ORDER
Letter read from Rhonda Hansen of Duval County Chapter requesting donations on behalf of her brother who has non-hodgkins lymphoma.
Today is Reggie's birthday. Reggie has gotten a lot of new members for Brevard Chapter. Cake presented to Reggie from Linda & Jerry.
Please see events listing.
Next State meeting Oct 13-15. Hillsborough County Chapter hosting
50/50 drawing of $82.00 won by Shawn Smith
The Secretaries notes will be mailed to the Chapters as soon as they are typed up.
Meeting adjourned.

Submitted by
Elizabeth "Rose" Brown

Internal Revenue Service
District Director

Department of the Treasury

Date: July 31, 1995

Person to Contact: Stop 6190, #2913
Telephone Number(s): 1-800-829-1040

Name and Current Address

Abate of Florida Inc
P. O. Box 585
DeBARY FL 32713-0585

First Social Security Number (On Return)	Spouse's Social Security Number	Employer Identification Number: 59-3101979		
Form Number/Tax Period	Refund Taxpayer Expects	Filing Status	Date Filed	Where Filed
Phone Number/Best Time to Call Work ( ) Home ( )	Person to Contact	Name/Address on Return ☐ Same as above		

☐ REFUND INQUIRY? ☐ LOST, STOLEN, DESTROYED? ☐ PREVIOUS CONTACT/DATE: _____
☐ PREVIOUS IRS REPLY (DATE/NATURE): _____

☒ OTHER INQUIRY: Verification of employer identification number

Dear Taxpayer:

12 In reply to your inquiry of 7-26-95 about your tax account, please see box(es) checked below. Please see the enclosed NA.

☐ 1. We have referred your inquiry to _____. If you don't hear from them within _____ days, please contact our office again.

☐ 2. Your refund check for $_____ was scheduled to be mailed on _____. If you haven't received it within _____ weeks of that date, please contact us again.

☐ 3. Your refund of $_____ was scheduled to be deposited directly to your account on _____. If you haven't received it within _____ weeks of that date, please contact us again.

☐ 4. We received your tax return but haven't completed processing it. We will contact you if we need more information. If you don't receive your refund or information about your return within the next _____ weeks, please contact our office again.

☐ 5. We are enclosing the transcripts of your account as you requested.

☐ 6. We can't find any information about your tax return by using the name and social security number shown above. Please contact our office if either is incorrect. However, if our information is correct and at least _____ weeks have passed

(over)

since you filed your return, please send us a copy of your return (including all attachments and copies of your W-2's). Both you and your spouse must sign the copy, if you filed jointly. We won't accept a photocopied signature. Mail it to the IRS Service Center, _____.

If you didn't keep copies of your documents, you may have to get them. If someone else prepared your return, that person may have a copy. Your employer may be able to give you a copy of your W-2, or you may be able to use an end-of-year earnings statement to establish your income.

☐ 7. We requested the information on your Form W-2/1099 and you should receive it in 5 weeks. Contact us if you haven't received it in that time.

☐ 8. We can't complete the processing of your return because your name or social security number doesn't match IRS records. Please complete the enclosed Form 4149 and return it in the envelope we have provided. If possible, include a copy of your social security card. Don't send the original card. Your refund check should be in the mail to you within _____ weeks after we receive the completed Form 4149. If your social security card doesn't show your current name, contact your local Social Security Administration Office to have their records corrected.

☐ 9. We have taken the appropriate action to have your refund issued based on the information you sent about the discrepancy in your name and social security number. You should receive the refund within _____ weeks.

☐ 10. Your refund has been delayed because our records show more than one return was filed using your social security number. If you didn't file more than one return, or if you filed a copy of your original return, please contact us.

☐ 11. We applied $_____ of your 19_____ federal tax refund to an outstanding debt reported to IRS by the _____. The rest of your refund was scheduled to be mailed to you on _____. If you believe you don't owe this debt, contact the agency at the address or telephone number shown below.

_____ _____

_____

_____

Telephone (___) ___ ____

If you and your spouse filed a joint return but only one of you is responsible for the debt, the other may be able to file a claim to recover his or her part of the refund. Please contact our office for help.

☒ 12. OTHER: We have verified 59-3101929 to be the correct employer identification number for Abate of Florida, INC. Thank you.

If you have questions about this matter, please call or write our office. Use the telephone number or address shown on the front of this letter. Whenever you write, please include your daytime telephone number and the best time for us to call you.

Sincerely yours,

M. Matteson

Taxpayer Service Division

Enclosure(s): As stated

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State

October 13, 1995

ABATE OF FLORIDA, INC.
P.O. BOX 585
DEBARY, FL 32713

SUBJECT: ABATE OF FLORIDA, INC.
Ref. Number: 757858

Please be advised, we have received your Annual Report; however, the document **has not been filed** and is being returned for the following:

A non-profit corporation must list three (3) directors or (3) trustees and their street addresses in block 12 or 13. Use a D: or T: to designate the title.

Please be advised, we have received your Annual Report; however, the document **has not been filed**. You may have, or will be receiving a second notice annual report form. Disregard the second notice and late fee if you make the following corrections and return your annual report within 30 days from the date of this letter.

If you have additional questions or need further assistance, please call the Annual Report Section at (904) 487-6056.

Thank you,

Cynthia Hendrixson
Annual Report Section

Letter number: 195A00046352

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State

September 11, 1995

ABATE OF FLORIDA, INC.
P.O. BOX 585
DEBARY, FL 32713

SUBJECT: ABATE OF FLORIDA, INC.
Ref. Number: 757858

Please be advised, we have received your request to file an amended annual report for the above corporation; however, the document **has not been filed** and is being returned for the following:

The filing fee for an amended annual report is $61.25.

A non-profit corporation must list three (3) directors or (3) trustees and their street addresses in block 12 or 13. Use a "D" or "T" to designate the title.

An officer or director listed in block 12, block 13 or on an attachment must sign the report in block 14.

After the corrections have been made, please return the report to: Division of Corporations, Annual Report Section, P.O. Box 6327, Tallahassee, Florida 32314 within 30 days from the date of this letter.

If you have additional questions or need further assistance, please call the Annual Report Section at (904) 487-6056.

Thank you,

Leilani White
ANNUAL_REPORTS Section

Letter number: 395A00041766

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State

September 27, 1995

ABATE OF FLORIDA, INC.
P.O. BOX 585
DEBARY, FL 32713

SUBJECT: ABATE OF FLORIDA, INC.
Ref. Number: 757858

Please be advised, we have received your Annual Report; however, the document **has not been filed** and is being returned for the following:

You failed to make the correction(s) requested in our previous letter.

A non-profit corporation must list three (3) directors or (3) trustees and their street addresses in block 12 or 13. Use a "D" or "T" to designate the title.

List the street address of each officer/director in block 12 or 13. If the officer or director does not have a street address, list the mailing address and write (N/A).

After the corrections have been made, return the report to: Division of Corporations, Annual Report Section, P.O. Box 6327, Tallahassee, Florida 32314 within 30 days from the date of this letter.

If you have additional questions or need further assistance, please call the Annual Report Section at (904) 487-6056.

Thank you,

Sean Toner
ANNUAL_REPORTS Section

Letter number: 995A00044272