2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 769156

1. Entity Name

BLUE KNIGHTS MOTORCYCLE CLUB FLORIDA CHAPTER IV,

FILED
00 JAN 18 AM 11:18
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DO NOT WRITE IN THIS SPACE

Principal Place of Business	Mailing Address
14901 FEATHERSTONE WAY DAVIE FL 33331 US	PINKERTON, JAMES 14901 FEATHERSTONE WAY DAVIE FL 33331-2937 US

2. Principal Place of Business	3. Mailing Address
PO. Box 52-3848	PO. Box 52-3848
Suite, Apt. #, etc. —	Suite, Apt. #, etc.
City & State: MIAMI FL	City & State: MIAMI FL
Zip: 33152 Country: USA	Zip: 33152 Country: USA

4. FEI Number: 65-0032375 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☒ $8.75 Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
PINKERSTON, JAMES J 14901 FEATHERSTONE WAY DAVIE FL 33331	Name: ALEXANDER RAMIREZ Street Address (P.O. Box Number is Not Acceptable): 14021 SW 37TH COURT City: DAVIE FL Zip Code: 33330

8. 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: Alexander Ramirez — Signature, typed or printed name of registered agent and title if applicable — ALEXANDER RAMIREZ, President — (NOTE: Registered Agent signature required when reinstating) — DATE: 01-15-2000

FILE NOW: FEE IS $61.25	9. Election Campaign Financing Trust Fund Contribution. ☐ $5.00 May Be Added to Fees	Make Check Payable to Department of State

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	P PINKERTON, JAMES 14901 FEATHERSTONE WAY DAVIE FL	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	P ALEXANDER RAMIREZ 14021 SW 37TH COURT DAVIE FL 33330	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VP DWYER, WILIAM 9494 NW 19 PLACE SUNRISE FL	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	V 300003114583--2 WILLIAM SOLEN 01/28/00--01054--020 5940 SW 58TH COURT *****70.00 *****70.00 DAVIE FL 33314-7310	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	ST SOLEN, WILLIAM 5940 SW 58 CY DAVIE FL 33314	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	S AGNES SARISKY 1331 N. 74TH TERRACE Hollywood FL 33024	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D PORTER, MADISON 13211 SW 67 ST MIAMI FL	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	T WILLIAM DWYER 9494 NW 19TH PLACE SUNRISE FL 33322	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D BUETTNER, KARL 14959 SW 63 ST MIAMI FL 33193	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D JOHN FRALEY 546 PATIO VILLAGE WAY WESTON FL 33326	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D RATNER, THOMAS 6340 SW 84 STREET MIAMI FL	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D GEORGE NADEAU 12871 SW 248TH TERRACE HOMESTEAD FL 33032-9084	☒ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: WILLIAM SOLEN — SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Vice-President — Date: 1/6/2000 — Daytime Phone #: (954) 792-7632