2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 05, 2006
Secretary of State

DOCUMENT# 769156

Entity Name: BLUE KNIGHTS MOTORCYCLE CLUB FLORIDA CHAPTER IV, INC.

Current Principal Place of Business:

12805 SW 115 CT
MIAMI, FL 33176 US

New Principal Place of Business:

Current Mailing Address:

12805 SW 115 CT
MIAMI, FL 33176 US

New Mailing Address:

FEI Number: 65-0032375 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

RAMIREZ, ALEXANDER
14021 S.W. 37TH COURT
DAVIE, FL 33330 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:	S	( ) Delete
Name:	D'AMICO, BENJAMIN	
Address:	12805 SW 115 CT	
City-St-Zip:	MIAMI, FL 33176 US	
Title:	P	( ) Delete
Name:	RAMIREZ, ALEX	
Address:	14021 SW 37 CT.	
City-St-Zip:	DAVIE, FL 33330 US	
Title:	T	( ) Delete
Name:	D'AMICO, BENJAMIN	
Address:	12805 SW 115 CT.	
City-St-Zip:	MIAMI, FL 33176 US	
Title:	D	( ) Delete
Name:	BAMBACH, DENNIS	
Address:	2201 NW 82 WAY	
City-St-Zip:	PEMBROKE PINES, FL 33024 US	
Title:	VP	( ) Delete
Name:	PORTER, MADISON	
Address:	13211 SW 67 AVE.	
City-St-Zip:	MIAMI, FL 33183	
Title:	D	( ) Delete
Name:	GARRETT, WILFORD	
Address:	11057 NW 18 DR.	
City-St-Zip:	PLANTATION, FL 33322	

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
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 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: BENJAMIN H. D'AMICO S/T 01/05/2006

Electronic Signature of Signing Officer or Director — Date