2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 02, 2007 8:00 am
Secretary of State
03-02-2007 90015 006 ****70.00

DOCUMENT # 769156

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

Principal Place of Business	Mailing Address
12805 SW 115 CT MIAMI, FL 33176 US	12805 SW 115 CT MIAMI, FL 33176 US

2. Principal Place of Business - No P.O. Box #	3. Mailing Address
1947 N.W. 182 AVE	1947 N.W 182 AVE
Suite, Apt. #, etc. —	Suite, Apt. #, etc. —
City & State: PEMBROKE PINES, FL	City & State: PEMBROKE PINES, FL
Zip: 33029 Country: USA	Zip: 33029 Country: USA

01212007 Chg-NP CR2E037 (12/06)

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
RAMIREZ, ALEXANDER 14021 S.W. 37TH COURT DAVIE, FL 33330	Name: SAME Street Address (P.O. Box Number is Not Acceptable): 6770 FORREST ST. City: HOLLYWOOD FL Zip Code: 33024

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

Filing Fee is $61.25
Due by May 1, 2007

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

Make check payable to Florida Department of State

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	S D'AMICO, BENJAMIN 12805 SW 115 CT MIAMI, FL 33176	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	P WILLIAM SOLEN 5710 ATLANTA ST. HOLLYWOOD, FL 33021	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	P RAMIREZ, ALEX 14021 SW 37 CT. DAVIE, FL 33330	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	V WILFRED GARRETT 11057 NW 18 DRIVE PLANTATION FL 33322	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	T D'AMICO, BENJAMIN 12805 SW 115 CT. MIAMI, FL 33176	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	S MIKE KENT 1947 NW 182 Ave. Pembroke Pines, FL 33029	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D BAMBACH, DENNIS 2201 NW 82 WAY PEMBROKE PINES, FL 33024	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	T Jeffrey ROSS 63 N.E. 117 STreet MIAMI, FL 33161	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VP PORTER, MADISON 13211 SW 67 AVE. MIAMI, FL 33183	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D VICTOR APONTE 1230 Bel Aire Dr. Pembroke Pines, FL 33027	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D GARRETT, WILFORD 11057 NW 18 DR. PLANTATION, FL 33322	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D JEFF FRIEND 13259 SW 112 TERR. MIAMI, FL 33186	☒ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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, President 1/24/07 954-483-4813
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

ATTACHMENT

ATTACHMENT - 2007

40027771

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BLOCK 11.

☒ ADDITION

D

MIKE KRANTZ
8103 S. PALM DR. # 218
PEMBROKE PINES, FL 33025

WILLIAM SOLEN, President
01/24/2007