2007 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N05000000043

FILED Aug 29, 2007 Secretary of State

Entity Name: ENFORCERS MOTORCYCLE CLUB NORTHPORT CHAPTER INC

Current Principal Place of Business: New Principal Place of Business:

27438 NATAL DRIVE 256 COUGAR WAY

PUNTA GORDA, FL 33983 ROTONDA WEST, FL 33947

Current Mailing Address: New Mailing Address:

27438 NATAL DRIVE 256 COUGAR WAY

PUNTA GORDA, FL 33983 ROTONDA WEST, FL 33947

FEI Number: 45-0571233 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

VONVOIGT, THOMAS K GALLENTINE, GARY L 27438 NATAL DRIVE 256 COUGAR WAY

PUNTA GORDA, FL 33983 US ROTONDA WEST, FL 33947 US

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: GARY L GALLENTINE 08/29/2007

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P () Delete Title: P (X) Change () Addition Name: SESSA, RICHARD A Name: RAIMBEAU, EDWARD

 Address:
 4201 HONEYSUCKLE AVE.
 Address:
 6546 COLISEUM BLVD

 City-St-Zip:
 PALM BEACH, FL 33410
 City-St-Zip:
 PORT CHARLOTTE, FL 33981

Title: V () Delete Title: V (X) Change () Addition Name: VONVOIGT, THOMAS Name: GALLENTINE, GARY L

Title: V () Delete Title: T (X) Change () Addition

 Name:
 RAINBOW, ED
 Name:
 FERNANDEZ, NORMAN

 Address:
 6546 COLLSEUM BLVD.
 Address:
 57 HANNAH ST

City-St-Zip: PORT CHARLOTTE, FL 33981 City-St-Zip: PORT CHARLOTTE, FL 33954

Title: T (X) Delete Title: () Change () Addition Name: SOUCIE. ROGER Name:

 Name:
 SOUCIE, ROGER
 Name:

 Address:
 2022 PICKARD LANE
 Address:

 City-St-Zip:
 NORT PORT, FL 34286
 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: GARY L GALLENTINE V 08/29/2007