

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08000007573

FILED
Apr 26, 2009
Secretary of State

Entity Name: NICHOLAS C. KOPPLIN MOTORCYCLE AWARENESS FOUNDATION INC.

Current Principal Place of Business:

7033 BONAVENTURE DRIVE
TAMPA, FL 33607

New Principal Place of Business:

Current Mailing Address:

7033 BONAVENTURE DRIVE
TAMPA, FL 33607

New Mailing Address:

FEI Number:

FEI Number Applied For ()

FEI Number Not Applicable (X)

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

METZ, ROBERT J
595 MAIN STREET
DUNEDIN, FL 34698 US

Name and Address of New Registered Agent:

CIOFALO, JASON M
812 NORMANDY TRACE ROAD
TAMPA, FL 33602 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: JASON M. CIOFALO

04/26/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: MARINO, LINDSEY
Address: 7033 BONAVENTURE DRIVE
City-St-Zip: TAMPA, FL 33607

Title: VP () Delete
Name: CIOFALO, JASON
Address: 7033 BONAVENTURE DRIVE
City-St-Zip: TAMPA, FL 33607

Title: SEC () Delete
Name: SHEVENELL, KEITH
Address: 7033 BONAVENTURE DRIVE
City-St-Zip: TAMPA, FL 33607

Title: TRS () Delete
Name: MARINO, LINDSEY
Address: 7033 BONAVENTURE DRIVE
City-St-Zip: TAMPA, FL 33607

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: MARINO, LINDSAY
Address: 7033 BONAVENTURE DRIVE
City-St-Zip: TAMPA, FL 33607

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 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: LINDSAY MARINO

P

04/26/2009

Electronic Signature of Signing Officer or Director

Date