

**2024 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N06000010672

**Entity Name:** GENE PEARSON MOTORCYCLE AWARENESS FOUNDATION, INC.

**FILED**  
**Apr 05, 2024**  
**Secretary of State**  
**8116262776CC**

**Current Principal Place of Business:**

202 TIMBERVIEW DRIVE  
SAFETY HARBOR, FL 34695

**Current Mailing Address:**

202 TIMBERVIEW DRIVE  
SAFETY HARBOR, FL 34695

**FEI Number: 90-0310124**

**Certificate of Status Desired: No**

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

METZ, ROBERT J  
595 MAIN STREET  
DUNEDIN, FL 34698 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:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**Officer/Director Detail :**

Title P  
Name PEARSON, DIANE E  
Address 202 TIMBERVIEW DRIVE  
City-State-Zip: SAFETY HARBOR FL 34695

Title VP  
Name PEARSON, EUGENE F  
Address 202 TIMBERVIEW DRIVE  
City-State-Zip: SAFETY HARBOR FL 34695

Title ST  
Name PEARSON, DIANE E  
Address 202 TIMBERVIEW DRIVE  
City-State-Zip: SAFETY HARBOR FL 34695

*I hereby 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 all other like empowered.*

**SIGNATURE: DIANE PEARSON**

**PRESIDENT**

**04/05/2024**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date