

**2022 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N11000006134

**Entity Name:** DEFENDERS MOTORCYCLE CLUB - 1ST OHIO CHAPTER, INC.

**FILED**  
**Jan 04, 2022**  
**Secretary of State**  
**7664206977CC**

**Current Principal Place of Business:**

318 EAST WILLIAMS ST.  
CARDINGTON, OH 43315

**Current Mailing Address:**

318 E. WILLIAMS ST.  
CARDINGTON, OH 43315 US

**FEI Number: 27-0874687**

**Certificate of Status Desired: No**

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

KOVAC, MICHAEL  
12320 DAVIS COURT  
FT MYERS, FL 33905 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: MICHAEL KOVAC**

**01/04/2022**

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title            PRESIDENT  
Name            OTTERBACHER, ISRAEL J  
Address        318 E. WILLIAMS ST.  
City-State-Zip: CARDINGTON OH 43315

Title            VP  
Name            STOUT, DENNIS  
Address        318 E. WILLIAMS ST.  
City-State-Zip: CARDINGTON OH 43315

Title            COMMANDER  
Name            CARTER, TRAVIS  
Address        318 E. WILLIAMS ST.  
City-State-Zip: CARDINGTON OH 43315

Title            TREASURER  
Name            ALEXANDER, STEPHEN  
Address        318 E. WILLIAMS ST.  
City-State-Zip: CARDINGTON OH 43315

Title            MAJOR  
Name            SCHIRALDI, TIM  
Address        318 E. WILLIAMS ST.  
City-State-Zip: CARDINGTON OH 43315

Title            LT. AT ARMS  
Name            RAMOS, FRANK  
Address        318 E. WILLIAMS ST.  
City-State-Zip: CARDINGTON OH 43315

Title            SECRETARY  
Name            VALENTINE, JEFF  
Address        318 E. WILLIAMS ST.  
City-State-Zip: CARDINGTON OH 43315

*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: STEPHEN ALEXANDER**

**TREASURER**

**01/04/2022**

Electronic Signature of Signing Officer/Director Detail

Date