

2025 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N11000010007

Entity Name: DEFENDERS MOTORCYCLE CLUB - ROCKY TOP CHAPTER,
INC**Current Principal Place of Business:**294 S VILLAGE LN
LAFOLLETTE, TN 37766**Current Mailing Address:**294 S VILLAGE LN
LAFOLLETTE, TN 37766 US**FEI Number: 45-3563849****Certificate of Status Desired: Yes****Name and Address of Current Registered Agent:**KOVAK, MIKE
15901 SW 254TH ST
HOMESTEAD, FL 33031 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: MIKE KOVAK****04/03/2025**

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title VP
Name OWENS, DAVID
Address 294 S VILLAGE LN
City-State-Zip: LAFOLLETTE TN 37766

Title LT.@ ARMS
Name RICKERMAN, MATT
Address 294 S VILLAGE LN
City-State-Zip: LAFOLLETTE TN 37766

Title MAJOR
Name WALDEN, BOB
Address 294 S VILLAGE LN
City-State-Zip: LAFOLLETTE TN 37766

Title SECRETARY
Name REAVES, STEPHEN SCOTT
Address 294 S VILLAGE LN
City-State-Zip: LAFOLLETTE TN 37766

Title PRESIDENT
Name PAYNE, DAVID
Address 294 S VILLAGE LN
City-State-Zip: LAFOLLETTE TN 37766

Title COMMANDER
Name BEARD, DALTON
Address 294 S VILLAGE LN
City-State-Zip: LAFOLLETTE TN 37766

Title TREASURER (TEMP)
Name PAYNE, DAVID
Address 294 S VILLAGE LN
City-State-Zip: LAFOLLETTE TN 37766

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 S. REAVES**SECRETARY****04/03/2025**

Electronic Signature of Signing Officer/Director Detail

Date