

2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 746514

FILED
Apr 19, 2010
Secretary of State

Entity Name: TRI-COUNTY MOTORCYCLE CLUB, INC.

Current Principal Place of Business:

4250 N E 3RD AVENUE
POMPANO BCH, FL 33064

New Principal Place of Business:

4250 N E 3RD AVENUE
POMPANO BCH, FL 33064 US

Current Mailing Address:

4250 N E 3RD AVENUE
POMPANO BCH, FL 33064

New Mailing Address:

4250 N E 3RD AVENUE
POMPANO BCH, FL 33064 US

FEI Number: 65-0156521

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

JOHNSON, LOUISE M.
4250 N.E. 3RD AVE.
POMPANO BEACH, FL 33064 US

Name and Address of New Registered Agent:

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

OFFICERS AND DIRECTORS:

Title: VD
Name: ADAMS, MARY L.
Address: 2762 N.W. 4TH CT
City-St-Zip: POMPANO BEACH, FL 33060 US

Title: TD
Name: MURRAY, UTHUR
Address: 921 NW HAMMONDVILLE RD
City-St-Zip: POMPANO BEACH, FL 33069 US

Title: SD
Name: JOHNSON, WILLOWPHINE
Address: 2111 NW 14TH AVE
City-St-Zip: FT LAUDERDALE, FL 33311 US

Title: PD
Name: JOHNSON, LOUISE
Address: 4250 N.E. 3RD AVE.
City-St-Zip: POMPANO BEACH, FL 33064 US

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: WILLOWPHINE JOHNSON

SD

04/19/2010

Electronic Signature of Signing Officer or Director

Date