## 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N00000000630

Apr 14, 2009 Secretary of State

Entity Name: BLUE KNIGHTS INTERNATIONAL LAW ENFORCEMENT MOTORCYCLE CLUB, FLORIDA IX CHAPTER,

**Current Principal Place of Business: New Principal Place of Business:** 

2229LIVE OAK DRIVE 2229 LIVE OAK DRIVE

NEW SMYRNA BEACH, FL 32168 NEW SMYRNA BEACH, FL 32168 US

**Current Mailing Address: New Mailing Address:** 

PO BOX 1693 PO BOX 1693

FLAGLER BEACH, FL 32136 FLAGLER BEACH, FL 32136 US

FEI Number: 57-8486776 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

TRACY, CLARA TRACY, CLARA 2229LIVE OAK DRIVE 2229 LIVE OAK DRIVE

NEW SMYRNA BEACH, FL 32168 NEW SMYRNA BEACH, FL 32168 US 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: 04/14/2009

> Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

**PRES** () Delete (X) Change ( ) Addition

LEWIS, LARRY Name: LEWIS, LARRY Name: 6223 SHORELINE DRIVE Address: 6223 SHORELINE DRIVE Address: City-St-Zip: PORT ORANGE, FL 32127 City-St-Zip: PORT ORANGE, FL 32127 US

Title: Title: (X) Change ( ) Addition ( ) Delete

HINSHAW, DAVE Name: HINSHAW, DAVE Name:

Address: 4652 BEACON LIGHT ROAD Address: 4652 BEACON LIGHT ROAD City-St-Zip: EDGEWATERR, FL 32141 City-St-Zip: EDGEWATERR, FL 32141 US

Title: S&T () Delete Title: S&T (X) Change ( ) Addition

ANDRE, RUDY ANDRE, RUDY Name: Name: Address: 1744 SOUTH FLAGLER AVE. Address: 1744 SOUTH FLAGLER AVE.

City-St-Zip: FLAGLER BEACH, FL 32136 City-St-Zip: FLAGLER BEACH, FL 32136 US

(X) Change ( ) Addition Title: DIR () Delete Title: DIR

COOPER, GLENN Name: DUCKETT, OLIN Name:

1146 WILIMINGTON DRIVE Address: Address: 4081 CAMPA LN City-St-Zip: DELTONA, FL 32725 City-St-Zip: ORMOND BEACH, FL FL 32174 US

Title: DIR () Delete Title: (X) Change ( ) Addition

HAYCOCK, CHARLIE HAYCOCK, CHARLIE Name: Name: 2301 MEMONIE TRAIL 2301 MEMONIE TRAIL Address: Address:

City-St-Zip: NEW SMYRNA, FL 32168 City-St-Zip: NEW SMYRNA, FL 32168 US

Title: () Delete Title: (X) Change ( ) Addition CASEY, MCDEVITT CASEY, MCDEVITT Name: Name: Address: 47 CIRCLE CREEK WAY Address: 47 CIRCLE CREEK WAY ORMOND BEACH, FL 32174 ORMOND BEACH, FL 32174 US City-St-Zip: 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: RUDY ANDRE S/T 04/14/2009

Electronic Signature of Signing Officer or Director

Date