2004 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N0000003470

Entity Name: GOOD GUYS MOTORCYCLE CLUB INC.

FILED Dec 21, 2004 Secretary of State

Current Principa	al Place of Business:	New Principal Place of Business:

5355 WASHINGTON ESTATES DR. JACKSONVILLE, FL 32209

Current Mailing Address: New Mailing Address:

5355 WASHINGTON ESTATES DR. JACKSONVILLE, FL 32209

FEI Number: 59-3612327 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:

ROBERSON, GARY M STEPHENS, CELLENE 7341 DOSTIE DR E 1504 PERRY STREET JACKSONVILLE, FL 32209 US APT. 6

JACKSONVILLE, FL 32209 US JACKSONVILLE, FL 32206 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: CHELLENE STEPHENS 12/21/2004

Electronic Signature of Registered Agent Date

City-St-Zip:

OFFICERS AND DIRECTORS:

JACKSONVILLE, FL 32208

City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

JACKSONVILLE, FL 32209 US

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

 Name:
 WOODARD, WILLIAM
 Name:
 ROSS, JAMES SR

 Address:
 2722 VAN GUNDY RD
 Address:
 8612 BERMUDA ROAD

 City-St-Zip:
 JACKSONVILLE, FL 32208
 City-St-Zip:
 JACKSONVILLE, FL 32208 US

Title:V() DeleteTitle:V(X) Change () AdditionName:JONES, ROBERT JRName:HARRISON, HONEYWOODAddress:9728 FLECHETTE AVENUEAddress:2122 W. 14TH STREET

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

 Name:
 JONES, DAISY
 Name:
 DAVIS, ALTAMÉSE

 Address:
 8904 CASTLE BLVD
 Address:
 4759 FIRESIDE DR W

 City-St-Zip:
 JACKSONVILLE, FL 32208
 City-St-Zip:
 JACKSONVILLE, FL 32210 US

Title: S () Delete Title: () Change () Addition

 Name:
 STEPHENS, CHELLENE
 Name:

 Address:
 1504 PERRY ST #6
 Address:

 City-St-Zip:
 JACKSONVILLE, FL 32206
 City-St-Zip:

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

 Name:
 ROBERSON, GARY
 Name:
 MILTON, DONALD

 Address:
 7341 DOSTIE DR E
 Address:
 8216 DELAWARE AVE

 City-St-Zip:
 JACKSONVILLE, FL 32209
 City-St-Zip:
 JACKSONVILLE, FL 32208

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: JAMES ROSS, SR PD 12/21/2004