2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT.(AR)

FILED Feb 16, 2007 08:00 AN Secretary of State DOCUMENT # N00000003797 1. Enlity Name FIASCO BROTHERS MOTORCYCLE CLUB, INC. Principal Place of Business Mailing Address 1390 19TH AVE SW PO BOX 650161 VERO BEACH FL 32962 VERO BEACH FL 32965-0161 2. Principal Place of Business - No P.O. Box # 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 1st MOORE CR2E037 (10/06) City & State City & State 4. FEI Number Applied For NO-T APPLICABLE Not Applicable Zıp Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent BLANCHARD, KENDALL W II Street Address (P.O. Box Number is Not Acceptable) 1390 19TH AVE SW VERO BEACH FL 32962 City Zip Code 8. 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. I am familiar with, and accept the obligations of registered agent, SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE FILE NOW: FEE IS \$61.25 Election Campaign Financing \$5.00 May Be Make Check Payable to Due By May 1, 2007 -Trust Fund Contribution. Florida Department of State Added to Fees 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 11. HILE ☐ Defete IIILE ☐ Change NAME BLANCHARD, KENDALL NAME STREET ADDRESS STREET ADDRESS 1390 19TH AVENUE, S.W. 02/28/07-80009-002 61.25 CITY-ST-ZIP CITY-S1-78 VERO BEACH FL 32962 ☐ Delete Change TITLE. TITLE Addition NAME CAMPBELL, RICHARD NAMI STREET ADDRESS STREET ADDRESS 2343 2ND CT SRE CITY-ST-7IP CITY-ST-ZIE VERO BEACH FL 32962 TOTALE □ Defete TITLE ☐ Change ☐ Addition NAME NAME SMITH, ROB STREET ADDRESS STRUCT ADDRESS 1575 20TH AVE SW CITY-S1-7IP CITY-S1-ZIP VERO BEACH FL 32962 TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME WOJTASZEK, STEVE STREET ADDRESS STREET ADDRESS 4345 1ST ST CITY-ST-7IP CITY-ST-ZIP VERO BEACH FL 32968 Delete TITLE TITLE Change Addition NAME ALBRIGHT, BOB NAME STREET AODRESS 3775 ALLEN AVE STREET ADDRESS CITY-ST-ZIP SEBASTIAN FL 32976 CITY-ST-ZIP TITLE Deleie шш Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS

12. I horeby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119. Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under eath; 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

CITY-ST-ZIP

SIGNATURE: Lendelle Bland DE KENDALL W. BLANCHARO II 2-4-07 473-7638

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