2009 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N00000006568

City-St-Zip:

DAYTONA BEACH, FL 32117

FILED Oct 21, 2009 Secretary of State

Entity Name: SUNCHASERS MOTORCYCLE CLUB, INC. **Current Principal Place of Business: New Principal Place of Business:** 223 S. MARTIN LUTHER KING BLVD DAYTONA BEACH, FL 32114 **Current Mailing Address: New Mailing Address:** 223 S. MARTIN LUTHER KING BLVD DAYTONA BEACH, FL 32114 FEI Number: 59-3677508 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice. Name and Address of Current Registered Agent: Name and Address of New Registered Agent: FERGUSON, SAMUEL L 223 S. MARTIN LUTHER KING BLVD DAYTONA BEACH, FL 32114 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: SAMUEL L. FERGUSON Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Change () Addition () Delete ROBINSON, ALVIN SR. Name: Name: 100 OAKWOOD DRIVE Address: Address: City-St-Zip: DAYTONA BEACH, FL 32117 City-St-Zip: Title: () Delete Title: () Change () Addition FERGUSON, SAMUEL L Name: Name: Address: 514 DAVIDSON STREET Address: City-St-Zip: DAYTONA BEACH, FL 32114 City-St-Zip: Title: () Delete Title: () Change () Addition WILLIAMS, DERRICK Name: Name: 546 ARTHUR AVENUE Address: Address: City-St-Zip: DAYTONA BEACH, FL 32114 City-St-Zip: Title: () Delete Title: () Change () Addition Name: WOLF, THEODORE Name: Address: 830 LEWIS DRIVE Address:

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.

City-St-Zip:

SIGNATURE: SAMUELL. FERGUSON VP 10/21/2009