

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000000748

FILED
Apr 11, 2007
Secretary of State

Entity Name: TRU-RYDERS MOTORCYCLE CLUB OF JACKSONVILLE, INC.

Current Principal Place of Business:

6196 RAINTREE ROAD
JACKSONVILLE, FL 32277

New Principal Place of Business:

2232 ASPEN RIDGE CT.
ATLANTIC BEACH, FL 32233

Current Mailing Address:

P.O. BOX 11542
JACKSONVILLE, FL 322391542

New Mailing Address:

FEI Number: 54-2144292 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

BLUE, KEITH I
6196 RAINTREE ROAD
JACKSONVILLE, FL 32277 US

Name and Address of New Registered Agent:

GARCIA, BENNY
2232 ASPEN RIDGE CT.
ATLANTIC BEACH, FL 32233 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: BENNY GARCIA

04/11/2007

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: BLUE, KEITH I
Address: 6196 RAINTREE ROAD
City-St-Zip: JACKSONVILLE, FL 32277

Title: VD (X) Delete
Name: GARCIA, BENNY
Address: 2232 ASPEN RIDGE COURT
City-St-Zip: ATLANTIC BEACH, FL 32233

Title: SD () Delete
Name: TUCKER, LARRY
Address: 6655 GEORGIA JACK DRIVE
City-St-Zip: JACKSONVILLE, FL 32244

Title: TD () Delete
Name: WOODWARD, TRAVIS
Address: 6649 GEORGIA JACK DRIVE
City-St-Zip: JACKSONVILLE, FL 32244

Title: D (X) Delete
Name: CLARANCE, MORRIS
Address: 6196 RAINTREE ROAD
City-St-Zip: JACKSONVILLE, FL 32277

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: GARCIA, BENNY
Address: 2232 ASPEN RIDGE CT
City-St-Zip: ATLANTIC BEACH, FL 32233

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: TD (X) Change () Addition
Name: WOODWARD, TRAVIS D
Address: 6649 GEORGIA JACK DRIVE
City-St-Zip: JACKSONVILLE, FL 32244

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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: BENNY GARCIA

PD

04/11/2007

Electronic Signature of Signing Officer or Director

Date