

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N01000001832

1. Entity Name

VIETNAM VETS MOTORCYCLE CLUB SE PROPERTIES, INC.

Principal Place of Business

8260 PASCAL DR
PUNTA GORDA FL 33950

Mailing Address

8260 PASCAL DR
PUNTA GORDA FL 33950

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

6. Name and Address of Current Registered Agent

OAKS, DAVID K ESQ
407 E MARION AVE, STE 101
PUNTA GORDA FL 33950

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

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.

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

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make Check Payable to
Department of State

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP WASILEK, THOMAS 165 HOLLY HILL RD CHAPEL HILL NC 27516	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DS MENZER, HANS P.O. BOX 512138 PUNTA GORDA FL 33951-2138	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D2V SEYFARTH, EDDIE J 98 ALEXANDER RD MATCHEZ MS 39120	☒ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D1V QUINN, ROBERT N 10159 ROBERT BOST RD MIDLAND NC 28107	☒ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DT PROCTER, ROBERT 117 DUCKLIND WAY WOODBINO GA 31569	☒ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE NAME STREET ADDRESS CITY-ST-ZIP	D2V Chandler, Huston 142 General Buccner Dr. Dover, TN 37058	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D1V Gietka Jr., Edward M. 5501 W. Hwy. 316 Reddick, FL 32686	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DT Kinder, Les 16895 SW 208 St. Miami, FL 33177	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Signature of Hans Menzer
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
Date 1/30/02 941-575-7222
Daytime Phone #

FILED
Feb 17, 2002 8:00 am
Secretary of State

02-17-2002 90099 018 ****61.25



DO NOT WRITE IN THIS SPACE

0047222

CR2E037 (9/01)