

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED
Jul 05, 2005
Secretary of State**

DOCUMENT# N01000006805

Entity Name: COBRAS MOTORCYCLE CLUB, INC.

Current Principal Place of Business:

3700 70TH AVE N
STUDIO E
PINELLAS PARK, FL 33781

New Principal Place of Business:

3700 70TH AVE N
STUDIO
PINELLAS PARK, FL 33781

Current Mailing Address:

3700 70TH AVE N
STUDIO E
PINELLAS PARK, FL 33781

New Mailing Address:

3700 70TH AVE N
STUDIO A
PINELLAS PARK, FL 33781

FEI Number: 59-3747285 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)
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:

BALLONE, LOUIS
4832 16TH. ST. N.
ST. PETERSBURG, FL 33703 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: _____

Electronic Signature of Registered Agent

_____ Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D () Delete
Name: ROBERT, NASH
Address: 1501 WINCHESTER RD.
City-St-Zip: ST. PETERSBURG, FL 33710

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

Title: D () Delete
Name: BALLONE, LOUIS
Address: 4832 16TH STREET N
City-St-Zip: ST. PETERSBURG, FL 33703

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

Title: D () Delete
Name: WASSON, MERRELL
Address: 18 SOPHIE AVENUE
City-St-Zip: DUNEDIN, FL 34698

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 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: MERRELL WASSON

D

07/05/2005

Electronic Signature of Signing Officer or Director

_____ Date