2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000007858

FILED Feb 12, 2007 Secretary of State

Entity Name: NAM KNIGHTS OF TAMPA BAY GULF COAST MC, INC.

Current Principal Place of Business: New Principal Place of Business:

2711 DRUID PLACE HOLIDAY, FL 34691

Current Mailing Address: New Mailing Address:

2711 DRUID PLACE HOLIDAY, FL 34691

FEI Number: 59-3755045 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

CAMPBELL, PETER 435 FLAT RIVER ST.

S.W. PALM BAY, FL 32908 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 () DeleteTitle:PRES (X) Change () AdditionName:CAMPBELL, PETERName:CAMPBELL, PETERAddress:435 FLAT RIVER ST.Address:435 FLAT RIVER ST.

Address: 435 FLAT RIVER ST. Address: 435 FLAT RIVER ST.

City-St-Zip: S.W. PALM BAY, FL 32908 City-St-Zip: S.W. PALM BAY, FL 32908

Title: D () Delete Title: SEC (X) Change () Addition Name: DIAZ, GEORGE Name: FARLEY, STEVE

Address: 2484 CITRUS HILL ROAD Address: 152 ROBERTS ROAD
City-St-Zip: PALM HARBOR, FL 34683 City-St-Zip: NOKOMIS, FL 34275

Title: D (X) Delete Title: () Change () Addition

 Name:
 DEBILIO, FRANCIS
 Name:

 Address:
 7831 BIRCHWOOD DRIVE
 Address:

 City-St-Zip:
 PORT RICHEY, FL 34668
 City-St-Zip:

 $\label{eq:title:D} {\sf Title:} \qquad {\sf D} \qquad (\) \, {\sf Delete} \qquad \qquad {\sf Title:} \qquad {\sf VICE} \qquad ({\sf X}) \, {\sf Change} \, (\) \, {\sf Addition}$

 Name:
 WISE, DANIEL J
 Name:
 WISE, DANIEL J VICE PR

 Address:
 1380 EWING STREET
 Address:
 1380 EWING STREET

 City-St-Zip:
 NOKOMIS, FL 34275
 City-St-Zip:
 NOKOMIS, FL 34275

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: DENISE BANTON, E.A. ACCT 02/12/2007