

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000007858

FILED
Mar 11, 2009
Secretary of State

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

Current Principal Place of Business:

17970 VILLA CREEK DR.
TAMPA, FL 33647

New Principal Place of Business:

15708 ALLMAND DR.
HUDSON, FL 34667

Current Mailing Address:

17970 VILLA CREEK DR.
TAMPA, FL 33647

New Mailing Address:

15708 ALLMAND DR.
HUDSON, FL 34667

FEI Number: 59-3755045

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

VARACCHI, BART
17970 VILLA CREEK
TAMPA, FL 33647 US

Name and Address of New Registered Agent:

MARTIN, TIMOTHY
15708 ALLMAND DR
HUDSON, FL 34667 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: TIMOTHY R MARTIN

03/11/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PRES () Delete
Name: VARACCHI, BART
Address: 17970 VILLA CREEK DR.
City-St-Zip: TAMPA, FL 33647

Title: VICE () Delete
Name: PERRY, TOM
Address: 6419 HARBOR DR
City-St-Zip: HUDSON, FL 34667

Title: SEC () Delete
Name: KOEBLER, ROBERT
Address: 8864 AVILA CT.
City-St-Zip: HUDSON, FL 34667

Title: TREA () Delete
Name: MARTIN, TIM
Address: 15708 ALLMAND DR.
City-St-Zip: HUDSON, FL 34667

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRES (X) Change () Addition
Name: PERRY, TOM
Address: 6419 HARBOR DR
City-St-Zip: HUDSON, FL 34667

Title: VICE (X) Change () Addition
Name: MARTIN, TIMOTHY
Address: 15708 ALLMAND DR
City-St-Zip: HUDSON, FL 34667

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

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

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.

SIGNATURE: TIMOTHY R MARTIN

VP

03/11/2009

Electronic Signature of Signing Officer or Director

Date