

2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
May 27, 2003 8:00 am
Secretary of State

05-27-2003 90172 035 ****61.25

DOCUMENT # N02000001411

1. Entity Name

SOUTHEAST MOTORCYCLE/VAN/TRUCK/SOCIAL CLUB ASSOCIATION, INC.



Principal Place of Business
**17110 SOUTHWEST 109TH AVE.
MIAMI FL 33157**

Mailing Address
**17110 SOUTHWEST 109TH AVE.
MIAMI FL 33157**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FFI Number

33-1053622

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

☐ CHECK HERE IF MAKING CHANGES

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**MACKEY, MANDY
17110 SOUTHWEST 109TH AVE.
MIAMI FL 33157**

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Mandy Mackey

(NOTE: Registered Agent signature required when reinstating)

4-16-03

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
Florida Department of State**

10. OFFICERS AND DIRECTORS

PD ☐ Delete
SCOTT, RODNEY
STREET ADDRESS **1299 COURTLAND BLVD.**
CITY-ST-ZIP **DELTONA FL 32738**

VD ☐ Delete
LEE, JOHN
STREET ADDRESS **2850N. OAKLAND FOREST DR.**
CITY-ST-ZIP **FT. LAUDERDALE FL**

SD ☐ Delete
MACKEY, MANDY
STREET ADDRESS **17110 SOUTHWEST 109TH AVE.**
CITY-ST-ZIP **MIAMI FL 33157**

TD ☐ Delete
RICHBURG, EMMETT
STREET ADDRESS **17201 NW 37TH CT.**
CITY-ST-ZIP **MIAMI FL 33055**

☐ Delete

☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ 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:

Mandy Mackey

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

4-16-03

CR2E037 (10/02)