

**2007 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 30, 2007 8:00 am
Secretary of State

03-21-2007 90039 029 ****61.25

DOCUMENT # N04000003786					
1. Entity Name L- TOWN RYDERS MOTORCYCLE CLUB INC					
Principal Place of Business 8305 SPLIT CREEK CIRCLE LAKELAND, FL 33809-7246			Mailing Address P O BOX 92134 LAKELAND, FL 33804-2134		
2. Principal Place of Business - No P.O. Box #		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State			
Zip	Country	Zip	Country	01142007 Chg-NP CR2E037 (12/06)	
4. FEI Number 20-0877603				Applied For ☐ Not Applicable	
5. Certificate of Status Desired ☐				\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent ALLEN, DANNY 1433 NORTH AMOS STREET LAKELAND, FL 33805			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. I am familiar with, and accept the obligations of registered agent. SIGNATURE: (NOTE: Registered Agent signature required when registering) DATE:					
Filing Fee is \$61.25 Due by May 1, 2007		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			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE PD NAME ALLEN, DANIEL STREET ADDRESS 1433 NORTH AMOS STREET CITY-ST-ZIP LAKELAND, FL 33805	☐ Delete		TITLE PD NAME Allen, Daniel STREET ADDRESS 1433 North Amos Street CITY-ST-ZIP Lakeland, FL 33805 - PRESIDENT	☐ Change ☒ Addition	
TITLE VPD NAME KNIGHT, ROBERT STREET ADDRESS 4808 FOX CREEK DRIVE CITY-ST-ZIP MULBERRY, FL 33880	☐ Delete		TITLE VPD NAME Knight, Robert STREET ADDRESS 4808 Fox Creek Drive CITY-ST-ZIP Mulberry, FLA. 33860 - VICE PRESIDENT	☐ Change ☒ Addition	
TITLE D NAME WILLIAMS, DARLENE STREET ADDRESS 2270 PROVIDENCE ROAD CITY-ST-ZIP LAKELAND, FL 33805	☒ Delete		TITLE BM NAME Nance, Bill STREET ADDRESS 8305 Split Creek Circle CITY-ST-ZIP Lakeland, FL 33804 - ASST VICE PRESIDENT	☐ Change ☒ Addition	
TITLE TD NAME TOMMY, WILLIAMS STREET ADDRESS 2270 PROVIDENCE RD CITY-ST-ZIP LAKELAND, FL 33805	☒ Delete		TITLE TD NAME Williams, Dexter STREET ADDRESS 1338 North Webster CITY-ST-ZIP Lakeland, FL 33805 - TREASURER	☐ Change ☒ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete		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 exemptions contained 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 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 817, 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: Date: _____ Daytime Phone #: _____					

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