

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000005243

FILED  
Jun 30, 2008  
Secretary of State

**Entity Name:** ENFORCERS MOTORCYCLE CLUB-LEE COUNTY CHAPTER INC.

**Current Principal Place of Business:**

1672 S FOUNTAINHEAD ROAD  
FORT MYERS, FL 33919

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 61965  
FT. MYERS, FL 339061965

**New Mailing Address:**

FEI Number: 20-1455840      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )  
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:**

NEEDHAM, CARL  
1672 S. FOUNTAINHEAD RD  
FT. MYERS, FL 33919      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:**

Title: PD      ( ) Delete  
Name: NEEDHAM, CARL  
Address: 1672 S. FOUNTAINHEAD RD  
City-St-Zip: FORT MYERS, FL 33919

Title: VP      ( ) Delete  
Name: BLANCO, JAMES  
Address: 1608 EUCLID AVE  
City-St-Zip: LEHIGH ACERS, FL 33972

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

Title: VP      (X) Change ( ) Addition  
Name: SCHELPPF, MICHAEL  
Address: 13884 SLEEPY HOLLOW LANE  
City-St-Zip: FT. MYERS, FL 33905

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: CARL NEEDHAM

PD

06/30/2008

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date