2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000009613

FILED May 09, 2005 Secretary of State

Entity Name: BLUE KNIGHTS LAW ENFORCEMENT MOTORCYCLE CLUB FLORIDA CHAPTER XXIII, INC.

Current Principal Place of Business: New Principal Place of Business: 174 VISTA GRANDE DRIVE 632 EAST DEVONHURST LANE PONTE VEDRA BEACH, FL 32084 ST. AUGUSTINE, FL 32095 **Current Mailing Address: New Mailing Address:** 174 VISTA GRANDE DRIVE 632 EAST DEVONHURST LANE PONTE VEDRA BEACH, FL 32084 ST. AUGUSTINE, FL 32095 FEI Number: 91-2154739 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: BRADLEY, CHARLES E 5040 DATIL PEPPER ROAD ST. AUGUSTINE, FL 320865690 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: () Delete (X) Change () Addition GONZALEZ, MANUEL GONZALEZ, MANUEL Name: Name: 174 VISTA GRANDE DRIVE Address: 632 EAST DEVONHURST LANE Address: City-St-Zip: PONTE VEDRA BEACH, FL 32084 City-St-Zip: ST. AUGUSTINE, FL 32095 Title: () Delete Title: () Change () Addition Name: BRADLEY, CHARLES E Name: Address: 5040 DATIL PEPPER ROAD Address: City-St-Zip: ST. AUGUSTINE, FL 320865690 City-St-Zip: Title: () Delete Title: () Change () Addition GILPIN, CHARLES D Name: Name: 12219 REEDPOND DRIVE WEST Address: Address: City-St-Zip: JACKSONVILLE, FL 32223 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 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: CHARLES D. GILPIN Т 05/09/2005