2000 UNIFORM BUSINESS REPORT (UBR)

SIGNATURE:

FILED DOCUMENT # N04764 Aug 17, 2000 8:00 am Secretary of State 1. Entity Name JOYRIDERS MOTORCYCLE CLUB, INC. 08-17-2000 90102 001 ****61.25 Principal Place of Business Mailing Address 3074 18TH AVENUE SOUTH 3074 18TH AVENUE SOUTH ST. PETERSBURG FL 33712-2554 ST. PETERSBURG FL 33712-2554 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Applied For City & State City & State 4. FEI Number 59-2442465 Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Street Address (P.O. Box Number is Not Acceptable) CHANCE, HOWARD 3655 27TH AVE SO. ST. PETERSBURG FL 33711 City 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 SIGNATURE DATE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) ï 9. Election Campaign Financing Make Check Payable to FILE NOW: FEE IS \$61.25 \$5.00 May Be Trust Fund Contribution. П Added to Fees Department of State After September 13, 2000 min. will be \$236.25 OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. 11. TITLE ☐ Addition ☐ Delete CHANCE, HOWARD NAME NAME 3655 27TH AVE. SO. STREET ADDRESS STREET ADDRESS CITY-\$T-ZIP CITY-ST-ZIP ST. PETERSBURG FL ☐ Change ☐ Addition ☐ Delete TITLE TITLE HOLMES, MCLANDA NAME NAME STREET ADDRESS 3867 14TH AVE. SOUTH STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ST. PETERSBURG FL SD. - - - - - . ☐ Delete __ Change ___ _ Addition = TITLE TITLE MOORE, DOROTHY NAME NAME STREET ADDRESS STREET ADDRESS 2540 37TH STREET SOUTH CITY-ST-ZIP ST. PETERSBURG FL CITY-ST-ZIE ☐ Addition TD ☐ Change TITLE Delete TITLE VENNAIL, LEE HUDSON NAME NAME STREET ADDRESS STREET ADDRESS 2549 37TH ST. SO. CITY-ST-ZIF CITY-ST-ZIP ST. PETERSBURG FL Change Addition Delete TITLE LAW, Robert NAME NAME 157-22Nd AVE. SO, STREET ADDRESS STREET ADDRESS 33705 CITY-ST-ZIP CITY-ST-7IP ☐ Change Addition Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP 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