2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 08, 2006
Secretary of State

DOCUMENT# N05000002382

Entity Name: ROLLING THUNDER FLORIDA CHAPTER VII, INC

Current Principal Place of Business:

1111 W. HARROW LANE
CITRUS SPRINGS, FL 34434 US

New Principal Place of Business:

Current Mailing Address:

1111 W. HARROW LANE
CITRUS SPRINGS, FL 34434 US

New Mailing Address:

PO BOX 88
HOLDER, FL 34445-008 US

FEI Number: 13-4293638 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

STEPANEK, JIM
111 HARROW LANE
CITRUS SPRINGS, FL 34434 US

Name and Address of New Registered Agent:

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: P ( ) Delete
Name: THOMPSON, RAYMOND W
Address: 7000 BEACH PLAZA # 805
City-St-Zip: ST. PETE BEACH, FL 33706 US

Title: VP ( ) Delete
Name: PERRINO, GENE
Address: 10721 N. OCEAN DRIVE
City-St-Zip: CITRUS SPRINGS, FL 34434 US

Title: S ( ) Delete
Name: STEPANEK, JIM
Address: 1111 W. HARROW LANE
City-St-Zip: CITRUS SPRINGS, FL 34434 US

Title: T ( ) Delete
Name: SNELSON, BILL
Address: P.O. BOX 836
City-St-Zip: WEBSTER, FL 33597 US

Title: CHM ( ) Delete
Name: HUGHES, KEN
Address: 10299 PALOMINO TRAIL
City-St-Zip: FLORAL CITY, FL 34436 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

Title: T (X) Change ( ) Addition
Name: GOODING, VICTORIA L
Address: 9331 E. FINWOOD CT.
City-St-Zip: INVERNESS, FL 34450 US

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

I hereby certify that the information supplied with this filing does not qualify for the 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: JIM STEPANEK S 01/08/2006
Electronic Signature of Signing Officer or Director — Date