

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000002445

FILED
Jan 11, 2007
Secretary of State

Entity Name: SPECIAL FORCES MOTORCYCLE CLUB, INC.

Current Principal Place of Business:

12200 PALOMINO LANE
FORT MYERS, FL 33912

New Principal Place of Business:

Current Mailing Address:

12200 PALOMINO LANE
FORT MYERS, FL 33912

New Mailing Address:

FEI Number: 23-4705409

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MCCORMICK, ROBERT S
12200 PALOMINO LANE
FORT MYERS, FL 33912 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: D () Delete
Name: MCCORMICK, ROBERT S
Address: 12200 PALOMINO LANE
City-St-Zip: FORT MYERS, FL 33912

Title: D () Delete
Name: KLAPPERICH, JOSEPH
Address: 4773 A WEST ELVA WAY
City-St-Zip: EWA BEACH, HI 96706

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: D (X) Change () Addition
Name: KLAPPERICH, JOSEPH
Address: 9 GRIDLEY LOOP
City-St-Zip: FT. LENOARD WOOD, MO 65473

Title: D () Change (X) Addition
Name: JOHNSON, DAVID K
Address: 87 ATHERTON WAY
City-St-Zip: LAYTON, UT 84091

Title: D () Change (X) Addition
Name: NIELSEN, ALVIN L
Address: 3014 A HOPKINS CT.
City-St-Zip: FT MEADE, MD 20755

Title: D () Change (X) Addition
Name: CAREY, JAMES J
Address: 28213 RIVER RUN DR.
City-St-Zip: LEESBURG, FL 34748

Title: D () Change (X) Addition
Name: SINKO, GEORGE S
Address: 3421 SABAL SPRINGS BLVD
City-St-Zip: N. FT. MYERS, FL 33917

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: ROBERT S. MCCORMICK

D

01/11/2007

Electronic Signature of Signing Officer or Director

Date