2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000002768

FILED Apr 09, 2009 Secretary of State

Entity Name: DEFENDERS MOTORCYCLE CLUB - LEE COUNTY FLORIDA CHAPTER, INC.

Current Principal Place of Business: New Principal Place of Business:

58 - 10TH ST N 58 - 10TH ST N

NAPLES, FL 34102 NAPLES, FL 34102 US

Current Mailing Address: New Mailing Address:

PO BOX 4189 PO BOX 4189

NORTH FORT MYERS, FL 339184189 NORTH FORT MYERS, FL 33918 US

FEI Number: 41-2141638 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

GREUSEL, JAMIE B 1104 N COLLIER BLVD

OFFICERS AND DIRECTORS:

MARCO ISLAND, FL 34145 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:

Date

Electronic Signature of Registered Agent

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

(X) Change () Addition () Delete

MALAGON, AUGIE MALAGON, AUGIE Name: Name: PO BOX 101208 Address: PO BOX 4189 Address:

City-St-Zip: CAPE CORAL, FL 33910 City-St-Zip: NORTH FORT MYERS, FL 33918 US

Title: Title: (X) Change () Addition () Delete TRUDO, TROY Name: VANDEUCE, RORY Name:

Address: PO BOX 101208 Address: PO BOX 4189 City-St-Zip: CAPE CORAL, FL 33910 City-St-Zip: NORTH FORT MYERS, FL 33918 US

Title: () Delete Title: (X) Change () Addition BROWN, ROY BROWN, ROY Name: Name:

PO BOX 101208 PO BOX 4189 Address: Address: City-St-Zip: CAPE CORAL, FL 33910 City-St-Zip: NORTH FORT MYERS, FL 33918 US

Title: () Delete Title: (X) Change () Addition Name: WRIGHT, STEVE Name: WOLF, HAROLD

Address: PO BOX 101208 Address: PO BOX 4189 City-St-Zip: CAPE CORAL, FL 33910 City-St-Zip: NORTH FORT MYERS, FL 33918 US

Title: () Delete Title: (X) Change () Addition

COFFEE, ALVIN COFFEE, ALVIN Name: Name: PO BOX 101208 PO BOX 4189 Address: Address:

NORTH FORT MYERS, FL 33918 US City-St-Zip: CAPE CORAL, FL 33910 City-St-Zip:

Title: () Delete Title: (X) Change () Addition KOWALKA, ROBERT KOWALKA, ROBERT Name: Name:

Address: PO BOX 101208 Address: PO BOX 4189

NORTH FORT MYERS, FL 33918 US CAPE CORAL, FL 33910 City-St-Zip: City-St-Zip:

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: ROBERT KOWALKA Т 04/09/2009