


**2005 NOT-FOR-PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**

**Mar 14, 2005 08:00 AM**  
**Secretary of State**

<b>DOCUMENT # N05528</b> 1. Entity Name SAND DOLLAR MOTORCYCLE CLUB, INC.	
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Principal Place of Business 124 WATSON DR FT WALTON BCH, FL 32548	Mailing Address P.O. BOX 491 FT WALTON BCH, FL 32549
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03112005 No Chg-NP CR2E037 (10/03)

4. FEI Number 59-2933181	Applied For Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75</b> Additional Fee Required
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**DO NOT WRITE IN THIS SPACE**

6. Name and Address of Current Registered Agent  ENGLER, GEORGE E JR 124 WATSON DR FT WALTON BCH, FL 32548
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**DO NOT WRITE  
IN THIS SPACE**

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE \_\_\_\_\_ (NOTE: Registered Agent signature required when renewing) DATE \_\_\_\_\_

**Filing Fee is \$61.25  
Due by May 1, 2005**

9. Election Campaign Financing ☐ **\$5.00** May Be Added to Fees

U000000263144  
03/14/05-80084-010 61.25

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P ENGLER, NAOMI 124 WATSON DR FORT WALTON BEACH, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPD BOWIE, PHIL 311 RIVERSIDE DR FORT WALTON BEACH, FL 32547
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T BRANNON, CHRIS 905 LAUDERHILL LN FORT WALTON BEACH, FL 32547
TITLE NAME STREET ADDRESS CITY-ST-ZIP	RDC ENGLER, GEORGE 124 WATSON DR. FT. WALTON BEACH, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S KEEFE, EDNA 314 EMELY LN FORT WALTON BEACH, FL 32547
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

**DO NOT WRITE  
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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 an address, with all other like empowered.

**SIGNATURE:** Chris Brannon  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/14/05 850-862-5907  
Date Daytime Phone #