

# 2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000003605

FILED  
Jan 05, 2011  
Secretary of State

**Entity Name:** VICTORY RIDERS ASSOCIATION OF SOUTH FLORIDA INC

**Current Principal Place of Business:**

240 NW 40TH AVE  
C/O RICHARD KEHOE  
DELRAY BEACH, FL 33445

**New Principal Place of Business:**

3621 NORTH OCEAN BLVD  
C/O MARC RICHARDSON  
FT LAUDERDALE, FL 33308

**Current Mailing Address:**

PO BOX 51497  
LIGHTHOUSE POINT, FL 33074

**New Mailing Address:**

3621 NORTH OCEAN BLVD  
C/O MARC RICHARDSON  
FT LAUDERDALE, FL 33308

**FEI Number:** 20-5655675

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

VICTORY RIDERS ASSOCIATION OF S. FLORIDA  
240 NW 40TH AVE  
DELRAY BEACH, FL 33445 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  
Name: KEHOE, RICHARD J  
Address: 240 NW 40TH AVE  
City-St-Zip: DELRAY BEACH, FL 33445

Title: V  
Name: RICHARDSON, MARC  
Address: 3621 NORTH OCEAN BLVD  
City-St-Zip: FT LAUDERDALE, FL 33308

Title: T  
Name: SELIGMAN, MICHAEL  
Address: 3621 NORTH OCEAN BLVD  
City-St-Zip: FT LAUDERDALE, FL 33308

I hereby 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 all other like empowered.

SIGNATURE: RICHARD J KEHOE JR

P

01/05/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date