2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 26, 2009
Secretary of State

DOCUMENT# N06000003940

Entity Name: FLORIDA GULF COAST BMW RIDERS, INC.

Current Principal Place of Business:

C/O ANNE DALTON
2044 BAYSIDE PKWY
FORT MYERS, FL 33901

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 9264
FORT MYERS, FL 33902

New Mailing Address:

FEI Number: 74-3173337 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

MARTIN, OLIVER E
2044 BAYSIDE PKWY
FORT MYERS, FL 33901 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: MARTIN, OLIVER
Address: 2044 BAYSIDE PKWY
City-St-Zip: FORT MYERS, FL 33901

Title: VP ( ) Delete
Name: RUDD, JONATHAN
Address: 2035 TERRAZZO LANE
City-St-Zip: NAPLES, FL 34104

Title: SECR ( ) Delete
Name: WATTS, DON
Address: 11515 AUSTIN KEANE CT.
City-St-Zip: ESTERO, FL 33928

Title: TREA ( ) Delete
Name: LYALL, GLEN S
Address: 3420 OAK HAMMOCK CT.
City-St-Zip: BONITA SPRINGS, FL 34134

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition
Name: RUDD, JONATHAN
Address: 2035 TERRAZZO LANE
City-St-Zip: NAPLES, FL 34104

Title: VP (X) Change ( ) Addition
Name: MARTIN, OLIVER E
Address: 2044 BAYSIDE PKWY
City-St-Zip: FORT MYERS, FL 33901

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

Title: ( ) Change ( ) Addition
Name:
Address:
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: OLIVER E. MARTIN VP 04/26/2009

Electronic Signature of Signing Officer or Director — Date