

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000008205

FILED  
Jul 03, 2009  
Secretary of State

**Entity Name:** BLUE KNIGHTS INTERNATIONAL LAW ENFORCEMENT MOTORCYCLE CLUB, FLORIDA CHAPTER XXVII, INC.

**Current Principal Place of Business:**

ONE POLICE PL  
PLANT CITY, FL 33566

**New Principal Place of Business:**

**Current Mailing Address:**

P.O.BOX 385  
PLANT CITY, FL 33564

**New Mailing Address:**

**FEI Number:** 26-0076963      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**  
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

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

BERGAU, BRYAN  
ONE POLICE PL  
PLANT CITY, FL 33566      US

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

MONROE, GLENN A  
3311 INNISBROOK DR.  
LAKELAND, FL 33810      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: GLENN A. MONROE

07/03/2009

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: DP      ( ) Delete  
Name: MONROE, GLENN  
Address: 3311 INNISBROOK DR  
City-St-Zip: LAKELAND, FL 33810

Title: DV      ( ) Delete  
Name: WATKINS, JAMES  
Address: ONE POLICE PL  
City-St-Zip: PLANT CITY, FL 33566

Title: DTS      ( ) Delete  
Name: BERGAU, BRYAN  
Address: ONE POLICE PL  
City-St-Zip: PLANT CITY, FL 33566

Title: D      ( ) Delete  
Name: RADER, CHAD  
Address: ONE POLICE PL  
City-St-Zip: PLANT CITY, FL 33566

Title: D      ( ) Delete  
Name: MORRIS, FRED  
Address: ONE POLICE PL  
City-St-Zip: PLANT CITY, FL 33566

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

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

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

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: GLENN A. MONROE

DP

07/03/2009

Electronic Signature of Signing Officer or Director

Date