

# 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000008205

**FILED**  
**Jan 15, 2010**  
**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 ( )**

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

MONROE, GLENN A  
3311 INNISBROOK DR.  
LAKELAND, FL 33810 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: DP  
Name: MONROE, GLENN  
Address: 3311 INNISBROOK DR  
City-St-Zip: LAKELAND, FL 33810

Title: DV  
Name: MCDANIEL, BILL  
Address: ONE POLICE PL  
City-St-Zip: PLANT CITY, FL 33566

Title: DS  
Name: RUSSELL, KYLE  
Address: ONE POLICE PL  
City-St-Zip: PLANT CITY, FL 33566

Title: DT  
Name: SIMS, J. T  
Address: 1305 N. BARNES  
City-St-Zip: PLANT CITY, FL 33563

Title: D  
Name: LOWERY, LLOYD  
Address: P.O. BOX 445  
City-St-Zip: PLANT CITY, FL 33564

Title: D  
Name: MAURER, BARRY  
Address: ONE POLICE PL  
City-St-Zip: PLANT CITY, FL 33566

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: GLENN MONROE

DP

01/15/2010

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

\_\_\_\_\_  
Date