


# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Feb 25, 2008 8:00 am**  
**Secretary of State**

02-25-2008 90053 017 \*\*\*\*70.00

<b>DOCUMENT # N07000001407</b>			
1. Entity Name <b>KING DAVID BIKERS OF SOUTH FLORIDA, INC</b>			
Principal Place of Business <b>10542 LAREINA RD DELRAY BEACH, FL 33446</b>		Mailing Address <b>10542 LAREINA RD DELRAY BEACH, FL 33446</b>	
2. Principal Place of Business - No P.O. Box #		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country
6. Name and Address of Current Registered Agent		7. Name and Address of New Registered Agent	
EIDA, MAXIM 10542 LAREINA RD DELRAY BEACH, FL 33446		Name Street Address (P.O. Box Number is Not Acceptable) City <b>FL</b> Zip Code	
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 _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small> DATE _____			
<b>Filing Fee is \$61.25 Due by May 1, 2008</b>		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00</b> May Be Added to Fees	
		Make check payable to Florida Department of State	
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TR LASCHIVER, ELIZABETH <input checked="" type="checkbox"/> Delete P.O. BOX 971042 BOCA RATON, FL 33497	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Treasurer <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition Mel D. Kantor 19142 Clonster Lake Lane Boca Raton, FL 33498
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP SIRKIN, RICHARD <input type="checkbox"/> Delete 10348 NW 51ST STREET CORAL SPRINGS, FL 33076	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Secretary <input type="checkbox"/> Change <input type="checkbox"/> Addition Larry Ashkenas 5240 Ventura Drive Delray Beach, FL 33484
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Dir of Human Relations <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition Steve Sotoloff 10473 Lake Vista Circle Boca Raton, FL 33498
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition



02202008 Chg-NP CR2E037 (12/06)

4. FEI Number Applied For  
Not Applicable

5. Certificate of Status Desired ☒ **\$8.75** Additional  
Fee Required

**SIGNATURE:**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

2/20/08 561-740-2525