

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000004082

FILED
Jan 18, 2009
Secretary of State

Entity Name: BIKERS4BOOBS & WALKERS4BOOBS FOR BREAST CANCER AWARENESS CORP

Current Principal Place of Business:

14497 OLIVER STREET
LARGO, FL 33774

New Principal Place of Business:

Current Mailing Address:

14497 OLIVER STREET
LARGO, FL 33774

New Mailing Address:

FEI Number: 06-1812986

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GREEN, EVI A
14497 OLIVER STREET
LARGO, FL 33774 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: GREEN, EVI A
Address: 14497 OLIVER STREET
City-St-Zip: LARGO, FL 33774

Title: VP () Delete
Name: GREEN, TOM A
Address: 14497 OLIVER STREET
City-St-Zip: LARGO, FL 33774

Title: S () Delete
Name: BATTERSON, ROBIN
Address: 4855 HARDING RD N
City-St-Zip: ST. PETERSBURG, FL 33709

Title: T () Delete
Name: LAUBITZ, GISELA
Address: 1432 DURLING DR. SOUTH
City-St-Zip: SOUTH PASADENA, FL 33707

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

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: V/D () Change (X) Addition
Name: HUGHES, CHARLOTTE
Address: 7972 3RD AVE S
City-St-Zip: ST. PETERSBURG, FL 33707

Title: R/D () Change (X) Addition
Name: CONLON, DENISE
Address: 14481 OLIVER STREET
City-St-Zip: LARGO, FL 33774

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: EVI GREEN

P

01/18/2009

Electronic Signature of Signing Officer or Director

Date