

# 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000004082

FILED  
Jan 08, 2010  
Secretary of State

**Entity Name:** BRA BIKERS RAISING 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  
Name: GREEN, EVI A  
Address: 14497 OLIVER STREET  
City-St-Zip: LARGO, FL 33774

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

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

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

Title: V/D  
Name: HUGHES, CHARLOTTE  
Address: 7972 3RD AVE S  
City-St-Zip: ST. PETERSBURG, FL 33707

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

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: EVI GREEN

P

01/08/2010

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

\_\_\_\_\_  
Date