

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000006864

FILED
Apr 08, 2008
Secretary of State

Entity Name: DEFENDERS MOTORCYCLE CLUB - BOSTON CHAPTER, INC.

Current Principal Place of Business:

24 EASTERN AVE.
WAKEFIELD, MA 01880

New Principal Place of Business:

Current Mailing Address:

24 EASTERN AVE.
WAKEFIELD, MA 01880

New Mailing Address:

FEI Number: FEI Number Applied For (X) FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

GREUSEL, JAMIE B
1104 N. COLLIER BLVD.
MARCO ISLAND, FL 34145 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: D Delete
Name: GARDNER, HARRY
Address: 24 EASTERN AVE.
City-St-Zip: WAKEFIELD, MA 01880

Title: D Delete
Name: GEORGE, DAVID
Address: 24 EASTERN AVE.
City-St-Zip: WAKEFIELD, MA 01880

Title: D Delete
Name: GALOTTI, NICK
Address: 24 EASTERN AVE.
City-St-Zip: WAKEFIELD, MA 01880

Title: D Delete
Name: HOLMES, ANTHONY
Address: 24 EASTERN AVE.
City-St-Zip: WAKEFIELD, MA 01880

Title: D Delete
Name: MORRIS, TED
Address: 24 EASTERN AVE.
City-St-Zip: WAKEFIELD, MA 01880

Title: SD Delete
Name: DIBONA, DOUG
Address: 24 EASTERN AVE.
City-St-Zip: WAKEFIELD, MA 01880

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D Change Addition
Name: MACHENRY, THOMAS
Address: 24 EASTERN AVE.
City-St-Zip: WAKEFIELD, MA 01880

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: THOMAS MACHENRY

TRES

04/08/2008

Electronic Signature of Signing Officer or Director

Date