2009 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

FILED
Feb 16, 2009
Secretary of State

DOCUMENT# N07000008789

Entity Name: OLE RIDERS MOTORCYCLE CLUB, INC.

Current Principal Place of Business:

2525 N MAIN STREET STE 1
JACKSONVILLE, FL 32206

New Principal Place of Business:

2525 N MAIN STREET STE 1
9144 NEW BERLIN RD
JACKSONVILLE, FL 32234

Current Mailing Address:

2525 N MAIN STREET STE 1
JACKSONVILLE, FL 32206

New Mailing Address:

9144 NEW BERLIN ROAD
JACKSONVILLE, FL 32234

FEI Number: **FEI Number Applied For ( )** **FEI Number Not Applicable (X)** **Certificate of Status Desired ( )**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

WILLIAMS, JEROME T SR
2525 N MAIN STREET STE 1
JACKSONVILLE, FL 32206 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: JEROME T. WILLIAMS, SR.
Electronic Signature of Registered Agent — Date

OFFICERS AND DIRECTORS:

Title: P ( ) Delete
Name: WILLIAMS, JEROME T SR
Address: 9144 NEW BERLIN RD
City-St-Zip: JACKSONVILLE, FL 32234

Title: S ( ) Delete
Name: MACK, NICHOLE
Address: 2525 N MAIN STREET STE 1
City-St-Zip: JACKSONVILLE, FL 32206

Title: V ( ) Delete
Name: WATSON, ERNEST A SR
Address: 3156 LITCHFIELD DRIVE
City-St-Zip: JACKSONVILLE, FL 32065

Title: T ( ) Delete
Name: CURRY, LARRY
Address: 2525 N MAIN STREET STE 1
City-St-Zip: JACKSONVILLE, FL 32206

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: S (X) Change ( ) Addition
Name: MACK, NICHOLE
Address: 9144 NEW BERLIN RD
City-St-Zip: JACKSONVILLE, FL 32234

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: T (X) Change ( ) Addition
Name: CURRY, LARRY
Address: 9144 NEW BERLIN RD
City-St-Zip: JACKSONVILLE, FL 32234

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: JEROME T. WILLIAMS, SR. MR. 02/16/2009
Electronic Signature of Signing Officer or Director — Date