2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08000004064

FILED Mar 01, 2009 Secretary of State

Entity Name: BMW MOTORCYCLES OWNERS OF NORTHEAST FLORIDA, INC.

Current Principal Place of Business: New Principal Place of Business:

11111-70 SAN JOSE BLVD., SUITE 57 JACKSONVILLE, FL 32223

Current Mailing Address: New Mailing Address:

11111-70 SAN JOSE BLVD., SUITE 57 JACKSONVILLE, FL 32223

FEI Number: 55-0810208 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

HIDAY, ROBERT D 4100 SOUTHPOINT DRIVE EAST, SUITE 103 JACKSONVILLE, FL 32216 US

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:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

 Title:
 PD () Delete
 Title:
 PD (X) Change () Addition

 Name:
 MEEKER, LARRY
 Name:
 HUNT, JOHN MR

 Address:
 181 RIVERWOOD DRIVE
 Address:
 5004 JULINGTON CREEK RD

 City-St-Zip:
 ORANGE PARK, FL 32003
 City-St-Zip:
 JACKSONVILLE, FL 32258

Title: VD () Delete Title: VD (X) Change () Addition Name: SIPLER, DON Name: WILDER, WILLIAM MR

Address: 413 NAUGATUCK DRIVE Address: 5865 WHITE SANDS ROAD
City-St-Zip: JACKSONVILLE, FL 32225 City-St-Zip: KEYSTONE HEIGHTS, FL 322656

Title: D () Delete Title: S (X) Change () Addition

 Name:
 WINFREE, HOWELL
 Name:
 WINKLE, CINDY MS

 Address:
 1930 NE 49TH AVENUE
 Address:
 12197 RIPKEN CIRCLE NO

 City-St-Zip:
 OCALA, FL 34470
 City-St-Zip:
 JACKSONVILLE, FL 32224

Title: () Delete Title: T () Change (X) Addition

Name: Name: MOLLOY, RICHARD MR

 Address:
 Address:
 3948 3RD STREET SOUTH APT 114

 City-St-Zip:
 City-St-Zip:
 JACKSONVILLE BEACH, FL 32250

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: RICHARD MOLLOY T 03/01/2009