

2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08000006896

FILED
Jan 16, 2012
Secretary of State

Entity Name: COMBAT VETERANS MOTORCYCLE ASSOC. FL CHAPT. 20-1 INC

Current Principal Place of Business:

1437 VICTORIA BLVD
ROCKLEDGE, FL 32955 US

New Principal Place of Business:

Current Mailing Address:

CVMA FL CHAPT 20-1
PO BOX 560652
ROCKLEDGE, FL 32956 US

New Mailing Address:

FEI Number: 26-3024902 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

PATT, ROBERT S
1437 VICTORIA BLVD
ROCKLEDGE, FL 32955 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: THOMAS, TIM
Address: 4040 NATURE LANE
City-St-Zip: COCOA, FL 32926 US

Title: VP
Name: BOSTIC, RIK
Address: 1804 PONDEROSA ST
City-St-Zip: COCOA, FL 32926 US

Title: TREA
Name: PATT, ROBERT
Address: 1437 VICTORIA BLVD
City-St-Zip: ROCKLEDGE, FL 32955 US

Title: SECT
Name: GOUTHRO,, RAY
Address: 2844 REDBUD CT
City-St-Zip: DELTONA, FL 32725

Title: PR
Name: SEXTON, MARK
Address: 2255 KING RICHARD RD
City-St-Zip: MELBOURNE, FL 32935

Title: SA
Name: MORGAN, GEORGE
Address: 16973 SE 248TH TERRACE
City-St-Zip: UMATILLA, FL 32784

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: ROBERT S PATT

TREA

01/16/2012

Electronic Signature of Signing Officer or Director

Date