

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N10000005719

FILED  
Mar 09, 2012  
Secretary of State

**Entity Name:** PHAT RYDERS MOTORCYCLE CLUB INC.

**Current Principal Place of Business:**

1425 E. 13TH ST  
JACKSONVILLE, FL 32206

**New Principal Place of Business:**

425 BIRCH ST  
JACKSONVILLE, FL 32206

**Current Mailing Address:**

221 NORTH HOGAN STREET  
122  
JACKSONVILLE, FL 32202

**New Mailing Address:**

**FEI Number:** 20-1355554      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired (X)**

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

ALLEN, SHERYL  
9043 POLK AVENUE  
JACKSONVILLE, FL 32208      US

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

WILLIS, TRICE  
425 BIRCH ST  
JACKSONVILLE, FL 32206      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: TRICE WILLIS

03/09/2012

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: PRES  
Name: WILLIS, TRICE  
Address: 425 BIRCH ST  
City-St-Zip: JACKSONVILLE, FL 32206

Title: VP  
Name: YOUNG, MELISSA  
Address: 221 N HOGAN ST #122  
City-St-Zip: JACKSONVILLE, FL 32202

Title: BM  
Name: DAVIS-FORD, MONICA  
Address: 221 N. HOGAN ST #122  
City-St-Zip: JACKSONVILLE, FL 32202

Title: SAA  
Name: THOMAS, SHARON  
Address: 221 N. HOGAN ST #122  
City-St-Zip: JACKSONVILLE, FL 32202

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: TRICE WILLIS

PRES

03/09/2012

Electronic Signature of Signing Officer or Director

Date