2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 11, 2012
Secretary of State

DOCUMENT# N11000007412

Entity Name: DEFENDERS MOTORCYCLE CLUB - RI ORIGINAL CHAPTER, INC.

Current Principal Place of Business:

4 RIVER ST
SMITHFIELD, RI 02917

New Principal Place of Business:

Current Mailing Address:

4 RIVER ST
SMITHFIELD, RI 02917

New Mailing Address:

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

Name and Address of Current Registered Agent:

BROWN, ROY W
12320 DAVIS CT
FT MYERS, FL 33905 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: DP
Name: BARZYKOWSKI, DANIEL J
Address: 4 RIVER ST
City-St-Zip: SMITHFIELD, RI 02917

Title: DV
Name: RAVE, DORIAN R
Address: 4 RIVER ST
City-St-Zip: SMITHFIELD, RI 02917

Title: DS
Name: REED, CHRISTOPHER A
Address: 4 RIVER ST
City-St-Zip: SMITHFIELD, RI 02917

Title: DT
Name: JORDAN, JASON R
Address: 4 RIVER ST
City-St-Zip: SMITHFIELD, RI 02917

Title: DC
Name: GREENLESS, JAY R
Address: 4 RIVER ST
City-St-Zip: SMITHFIELD, RI 02917

Title: DM
Name: DELICIO, ANDREW P
Address: 4 RIVER ST
City-St-Zip: SMITHFIELD, RI 02917

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: JASON JORDAN TREA 02/11/2012

Electronic Signature of Signing Officer or Director — Date