

# 2005 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N22901

FILED  
Oct 10, 2005  
Secretary of State

**Entity Name:** VIETNAM VETERANS MOTORCYCLE CLUB, CHAPTER D ASSOCIATION, INC.

**Current Principal Place of Business:**

P O BOX 3931  
BAY PINES, FL 33504

**New Principal Place of Business:**

**Current Mailing Address:**

P O BOX 3931  
BAY PINES, FL 33504

**New Mailing Address:**

**FEI Number:** 25-1459399      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **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:**

MACARAGES, JEFF  
1405 N. KINGSWAY ROAD  
SEFFNER, FL 33584      US

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

PATRIZZI, ALPHONSE L  
1531 DELAWARE AVE N.E  
SAINT PETERBURG, FL 33703      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: ALPHONSE L PATRIZZI

10/10/2005

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: TD      ( ) Delete  
Name: BENSON, R  
Address: 3301 58TH AVE. N.  
City-St-Zip: ST. PETERSBURG, FL 33714

Title: P      ( ) Delete  
Name: WALKER, LARRY  
Address: 4841 83 TERRACE N.  
City-St-Zip: PINELLAS PARK, FL 33781

Title: MD      ( ) Delete  
Name: DOUKAS, DONALD  
Address: 147 SE LINCOLN CIRLCE NORTH  
City-St-Zip: SAINT PETERSBURG, FL 33703

Title: TSD      ( ) Delete  
Name: DAVIS, KENT  
Address: 640 115TH AVE  
City-St-Zip: TREASURE ISLAND, FL 33706

Title: V      ( ) Delete  
Name: STEVE SHEPERD,  
Address: 12550 MORRIS BRIDGE RD  
City-St-Zip: THONOTOSASSA, FL 33592

Title: MD      ( ) Delete  
Name: COX, DAVID L.  
Address: 13432 HACIENDA DRIVE  
City-St-Zip: LARGO, FL 34644

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

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

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

Title: TSD      (X) Change ( ) Addition  
Name: SCOTT, THOMAS C  
Address: 5034 FAIRFIELD CT  
City-St-Zip: LAKE LAND, FL 33811

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

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

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: ALPHONSE L PATRIZZI

TRS

10/10/2005

Electronic Signature of Signing Officer or Director

Date