

2009 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT**FILED**
Apr 28, 2009
Secretary of State

DOCUMENT# N96000002834

Entity Name: NAM KNIGHTS OF AMERICA MOTORCYCLE CLUB - SOUTH FLORIDA CHAPTER, INC.**Current Principal Place of Business:**1126 CLARE AVENUE
WEST PALM BEACH, FL 33401**New Principal Place of Business:****Current Mailing Address:**1126 CLARE AVENUE
WEST PALM BEACH, FL 33401**New Mailing Address:****FEI Number:** 65-0684270**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**LOFF, LONNIE
1170 SW 1ST WAY
BOCA RATON, FL 33486 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 () Delete
Name: GRAVES, ROBERT
Address: 15170 79TH TERRACE N.
City-St-Zip: PALM BEACH GARDEN, FL 33418**Title:** V () Delete
Name: SCHEBELL, ANTHONY
Address: 5281 CHELAN COVE
City-St-Zip: LAKE WORTH, FL 33467**Title:** S () Delete
Name: LOFF, LONNIE
Address: 1170 SW 1ST WAY
City-St-Zip: BOCA RATON, FL 33486**Title:** T () Delete
Name: BURKETT, JOHN
Address: 4291 FOSS ROAD
City-St-Zip: LAKE WORTH, FL 33461**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:** T (X) Change () Addition
Name: VIROSTKO, DENNIS
Address: 13595 157TH COURT NORTH
City-St-Zip: JUPITER, FL 33478

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: LONNIE LOFF

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04/28/2009

Electronic Signature of Signing Officer or Director

Date