## FILE NOW: FILING FEE IS \$61.25

**NONPROFIT** CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State **DIVISION OF CORPORATIONS** 

## 1998 **DOCUMENT #**1. Corporation Name N97000005304

## NAM KNIGHTS MOTORCYCLE CLUB OF AMERICA, HIGHLAND DIVISION, INC.

Principal Place of Business Mailing Address 12141 U.S. HWY. 98 12141 U.S. HWY. 98 3. Date Incorporated or Qualified SEBRING FL 33870 SEBRING FL 33870 09/17/1997 Applied For Not Applicable 20. Mailing Address P.O. Box 2. Principal Place of Business \$8.75 Additional 5. Certificate of Status Desired 338X Fee Required Suite, Apt. #, etc. Suite, Apt. #, etc. 6. Election Campaign Financing \$5.00 May Be 22 27 Trust Fund Contribution Added to Fees City & State City & State 7. Is this nonprofit corporation a homeowners association? FL Sebring Yes No 23 28 Zip Country Country Zip 8. This corporation owes or has paid the current year Intangible AZÚ Personal Property Tax due June 30. Yes 24 26 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name MINGER, MARVIN Street Address (P.O. Box Number is Not Acceptable) 3 12141 U.S. HWY. 98 83 SEBRING FL 33870 84 City Zip Code 11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes. SIGNATURE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signsture requ 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. DELETE Change Addition 1.1 TITLE TITLE MINGER, MARVIN NAME 1.2 NAME 12141 U.S. HWY. 98 1.3 STREET ADDRESS STREET ADORESS SEBRING FL 33870 1.4 CITY-ST-ZIP CITY-ST-ZIP DELETE Change Addition TITLE 2.1 TITLE VICE PRESIDENT- DIRECTOR TUSSELMAN, JOHN 7030 CR 175 NUM HALL, CHARLES 2.2 NAME STREET ADDRESS P. O. BOX 1961 2.3 STREET ADDRESS LAKE PLACID FL 33682 SEBRING, FL 3387D CITY - ST - ZIP 2.4 CITY-ST-ZIP DELETE MANLEY MARK SECRETARY-DIRECTOR Change Addition 3.1 TITLE TITLE OLIN, TIM 3.2 NAME NAME 69 DBSERVATION RUE, # 4 4719 SAGO PALM DR. 3.3 STREET ADDRESS STREET ADDRESS SEBRING FL 33870 3.4. CITY-ST-ZIP LAKE PLACID FL 32852 CITY-ST-ZIP TITLE DELETE 4.1 TITLE Change Addition TREASURER - DIRECTOR FUSSELMAN, JOHN 4. 2 NAME ROBERS, JAMES 7030 C.R. 178 6116 LAKE FRONT DRIVE STREET ADDRESS 4.3 STREET ADDRESS

CITY - ST - ZIP 6.4 CITY-ST-ZIP 14. I hereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is five and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address.

4.4 CITY-ST-ZIP

**5.3 STREET ADDRESS** 5.4 CITY - ST - ZIP

5.1 TITLE

5.2 NAME

6.1 TITLE

6.2 NAME 6.3 STREET ADDRESS

SIGNATURE:

CITY-ST-ZIP

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

TITLE NAME SEBRING FL 33870

DELETE

DELETE

4-17-98

SEBRING, FL 33870

941-655-0114

Change

Change

**FILED** 

Apr 28 1998 8:00am

Secretary of State

Addition

☐ Addition