

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N98000003389

FILED
Apr 10, 2009
Secretary of State

Entity Name: ROUGH RIDERS MC, INC.

Current Principal Place of Business:

1238 SW ASTURIA AVE
PORT SAINT LUCIE, FL 34953

New Principal Place of Business:

Current Mailing Address:

1238 SW ASTURIA AVE
PORT SAINT LUCIE, FL 34953

New Mailing Address:

1238 SW ASTURIA AVE
PORT SAINT LUCIE, FL 34953

FEI Number: 01-0583378

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

CARNEVALE, FRANK R
1238 SW ASTURIA AVE
PORT SAINT LUCIE, FL 34953 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: MCCLOSKEY, ROBERT
Address: 3908 SW DARMOUTH ST
City-St-Zip: PORT SAINT LUCIE, FL 34953

Title: V () Delete
Name: LANIGAN, JERRY
Address: 920 CORAL ST
City-St-Zip: FORT PIERCE, FL 34982

Title: S () Delete
Name: CARNEVALE, FRANK R
Address: 1238 SW ASTURIA AVE
City-St-Zip: PORT SAINT LUCIE, FL 34953

Title: TR (X) Delete
Name: GRIFFITH, RANDAL
Address: 2862 NE YORKSHIRE LN
City-St-Zip: JENSEN BEACH, FL 34957

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P/TR (X) Change () Addition
Name: MCCLOSKEY, ROBERT
Address: 3908 SW DARMOUTH ST
City-St-Zip: PORT SAINT LUCIE, FL 34953

Title: VP (X) Change () Addition
Name: PAUL WAIBLE
Address: 1238 SW ASTURIA AVE
City-St-Zip: PORT SAINT LUCIE, FL 34953

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 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: FRANK R, CARNEVALE

S

04/10/2009

Electronic Signature of Signing Officer or Director

Date