

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N99000002367

FILED
Jan 26, 2007
Secretary of State

Entity Name: NORTH FLORIDA SOUTH ALABAMA MOTORCYCLE CLUB INC.

Current Principal Place of Business:

7401 WOODSIDE RD.
PENSACOLA, FL 32526

New Principal Place of Business:

Current Mailing Address:

7401 WOODSIDE RD.
PENSACOLA, FL 32526

New Mailing Address:

FEI Number: 59-3630056

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PETERSON, GREG
7401 WOODSIDE RD.
PENSACOLA, FL 32526 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: D/P () Delete
Name: PETERSON, GREG
Address: 7401 WOODSIDE RD.
City-St-Zip: PENSACOLA, FL 325268578 US

Title: DVP () Delete
Name: WOMBLE, BEN
Address: 1275 LAMB DRIVE
City-St-Zip: GULF BREEZE, FL 32561 US

Title: TD () Delete
Name: KADROVACH, DOUGLAS
Address: 3355 PURSELL LANE
City-St-Zip: PENSACOLA, FL 32526

Title: SD () Delete
Name: WALKER, DANIEL H
Address: 1732 BROADVIEW ST
City-St-Zip: MILTON, FL 32583

Title: SD () Delete
Name: WALKER, CATHRINE L
Address: 1732 BROADVIEW ST
City-St-Zip: MILTON, FL 32583

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: () 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 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: GREGORY D PETERSON

D/P

01/26/2007

Electronic Signature of Signing Officer or Director

Date