2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000097475

FILED Feb 04, 2008 Secretary of State

Entity Name: BMW MOTORCYCLE OWNERS OF NORTHEAST FLORIDA, INC.

			New Principal Place of Pusings			
Current Principal Place of Business:			New Princ	ipal Place of Business:		
SUITE 57	AN JOSE BLVI					
JACKSONVILLE, FL 322237297 US						
Current Mailing Address:			New Mailir	New Mailing Address:		
11111-70 SAN JOSE BLVD. SUITE 316						
	VILLE, FL 322237297 US					
FEI Number:	55-0810208	FEI Number Applied For () FEI Nu	mber Not Appli	icable () Certificate of Status Desired ()		
Name and	Address of Cu	urrent Registered Agent:	Name and	Address of New Registered Agent:		
HIDAY, ROBERT D 4100 SOUTHPOINT DRIVE EAST SUITE 103 JACKSONVILLE, FL 32216 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:						
	Electronic	c Signature of Registered Agent		Date		
Election Campaign Financing Trust Fund Contribution ().						
OFFICERS AND DIRECTORS:			ADDITION	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title:	` '	Delete	Title:	S (X) Change () Addition		
Name: Address:	ANDRADE, ROX		Name: Address:	MOLLOY, RICHARD 3948 3RD STREET SO		
City-St-Zip:	ATLANTIC BEAC		City-St-Zip:	JACKSONVILLE BEACH, FL 32250 US		
Title:		Delete	Title:	VP (X) Change () Addition		
Name:	NELSON, NORM 7430 SR A1A SC		Name:	SIPLER, DON		
Address: City-St-Zip:		NE, FL 32080 US	Address: City-St-Zip:	413 NAUGATUCK DR JACKSONVILLE, FL 32225 US		
Title:	T ()	Delete	Title:	T (X) Change () Addition		
Name:	GIVENS, WAYNE		Name:	HIDAY, ROBERT		
Address: City-St-Zip:	9938 ORCHARD JACKSONVILLE,		Address: City-St-Zip:	4100 SOUTHPOINT DRIVE EAST JACKSONVILLE, FL 32216 US		
Title:	P ()[Delete	Title:	() Change () Addition		
Name:	MEEKER, LARRY		Name:			
Address: City-St-Zip:	2351 EAGLE HA ORANGE PARK,		Address: City-St-Zip:			
Title:		Delete	Title:	D (X) Change () Addition		
Name:	MILLER, DAVE	WE	Name:	WILDER, WILLIAM 5865 WHITE SANDS RD		
Address: City-St-Zip:	169 BARTLETT A ORANGE PARK,		Address: City-St-Zip:	KEYSTONE HEIGHTS, FL 32656 US		
Title:	. ,	Delete	Title:	D (X) Change () Addition		
Name:	ROBINSON, WIL		Name:	STEVENSON, JIM		
Address: City-St-Zip:	7004 GAINES CT JACKSONVILLE,		Address: City-St-Zip:	96218 BLACKROCK HAMMOCK DR YULEE, FL 32097		

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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: RICHARD MOLLOY S 02/04/2008