

2010 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

**FILED
Dec 02, 2010
Secretary of State**

DOCUMENT# P04000157833

Entity Name: NEW SMYRNA MOTORCYCLE COMPANY, INC.

Current Principal Place of Business:

1899 STATE ROAD 44
NEW SMYRNA BEACH, FL 32168

New Principal Place of Business:

Current Mailing Address:

1637 N US HWY 1
ORMOND BEACH, FL 32174

New Mailing Address:

FEI Number: 20-2178089 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PEPE, DEAN G
1637 N US HWY 1
ORMOND BEACH, FL 32174 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: VPD
Name: ROSSMEYER, WILLIAM J
Address: 1637 N US HWY 1
City-St-Zip: ORMOND BEACH, FL 32174 US

Title: PTD
Name: PEPE, SHELLY R
Address: 1637 N US HWY 1
City-St-Zip: ORMOND BEACH, FL 32174 US

Title: VPSD
Name: CAMPBELL, MANDY R
Address: 1637 N US HWY 1
City-St-Zip: ORMOND BEACH, FL 32174 US

Title: VPD
Name: VAN PATTEN, WENDY R
Address: 1637 N US HWY 1
City-St-Zip: ORMOND BEACH, FL 32174 US

Title: VPD
Name: BLALOCK, RANDY R
Address: 1637 N US HWY 1
City-St-Zip: ORMOND BEACH, FL 32174 US

I hereby 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 all other like empowered.

SIGNATURE: SHELLY R PEPE

PTD

12/02/2010

_____ Electronic Signature of Signing Officer or Director

_____ Date