

2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08000007459

Entity Name: ROLLING THUNDER INC FL CHAPTER 3**Current Principal Place of Business:**410 NE 5TH STREET
WILLISTON, FL 32696**Current Mailing Address:**410 NE 5TH STREET
WILLISTON, FL 32696 US**FEI Number:** 26-0061726**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**LYNCH, THOMAS P
410 NE 5TH STREET
WILLISTON, FL 32696 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 Signature of Registered Agent_____
Date**Officer/Director Detail :**

Title	P
Name	HILDERBRAND, HERB
Address	1966 SILVER BIRCH PLACE
City-State-Zip:	MIDDLEBURG FL 32068

Title	VP
Name	WILCOX, FRED
Address	27038 NW 160TH PLACE
City-State-Zip:	HIGH SPRINGS FL 32643

Title	T
Name	LYNCH, THOMAS P
Address	410 NE 5TH STREET
City-State-Zip:	WILLISTON FL 32696

Title	S
Name	JOHNSON, PAULA
Address	9902 SW 87 TERRACE
City-State-Zip:	GAINESVILLE FL 32608

Title	COB
Name	MOORE, KEITH
Address	4627 JAVELINE STREET
City-State-Zip:	MIDDLEBURG FL 32068

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

SIGNATURE: THOMAS LYNCH

T

03/24/2016

Electronic Signature of Signing Officer/Director Detail_____
Date