

2019 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N17000004905

Entity Name: GIDEONS MOTORCYCLE CLUB INC**Current Principal Place of Business:**1100 SOUTH POWERLINE RD,
SUITE #103
DEERFIELD BEACH, FL 33442**Current Mailing Address:**1027 SW 42ND AVE
DEERFIELD BEACH, FL 33442 US**FEI Number:** 82-1562490**Certificate of Status Desired:** Yes**Name and Address of Current Registered Agent:**CSG - CAPITAL SERVICES GROUP INC
446 W HILLSBORO BLVD
DEERFIELD BEACH, FL 33441 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	CHAVES, EDILSON B
Address	1100 SOUTH POWERLINE RD, SUITE #103
City-State-Zip:	DEERFIELD BEACH FL 33442

Title	VP
Name	SILVA, ALEXANDRE A
Address	1100 SOUTH POWERLINE RD, SUITE #103
City-State-Zip:	DEERFIELD BEACH FL 33442

Title	S
Name	SILVA, DANIELA P
Address	1100 SOUTH POWERLINE RD, SUITE #103
City-State-Zip:	DEERFIELD BEACH FL 33442

Title	T
Name	CHAVES, WANDERLEIA G
Address	1100 SOUTH POWERLINE RD, SUITE #103
City-State-Zip:	DEERFIELD BEACH FL 33442

Title	DIRECTOR, EVENT
Name	JR LIRA , GENTIL PEREIRA
Address	1100 SOUTH POWERLINE RD, SUITE #103
City-State-Zip:	DEERFIELD BEACH FL 33442

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: WANDERLEIA G CHAVES

TREASURE

01/25/2019

Electronic Signature of Signing Officer/Director Detail

Date