

**2024 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N23000011940

**Entity Name:** LATIN AMERICAN BIKER ASSOCIATION ORLANDO CHAPTER  
INC. NON- PROFIT

**FILED**  
**Mar 02, 2024**  
**Secretary of State**  
**7808954483CC**

**Current Principal Place of Business:**

7284 N FRONTAGE RD  
ORLANDO, FL 32812

**Current Mailing Address:**

7284 N FRONTAGE RD  
ORLANDO, FL 32812

**FEI Number: 93-3708419**

**Certificate of Status Desired: No**

**Name and Address of Current Registered Agent:**

PABON, WILFRED  
7284 N FRONTAGE RD  
ORLANDO, FL 32812 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	Title	VP
Name	PABON, WILFRED	Name	MCGARVEY, LUCY
Address	7284 N FRONTAGE RD	Address	110 BLUE INDIGO CT
City-State-Zip:	ORLANDO FL 32812	City-State-Zip:	KISSIMMEE FL 34743
Title	BM	Title	TREASURE
Name	CARDENAS, SERAFINA	Name	LORIE, ANTONIO
Address	255 PINK IBIS BEND	Address	179 BRUNSWICK DRIVE
City-State-Zip:	SAINT CLOUD FL 34772	City-State-Zip:	DAVENPORT FL 33837

*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: CARDENAS, SERAFINA**

**BUSINESS MANAGER**

**03/02/2024**

Electronic Signature of Signing Officer/Director Detail

Date