FILE NOW: FILING FEE AFTER MAY 1 IS $155.00

CORPORATION ANNUAL REPORT **1995**

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

APPROVED AND FILED

95 JUN -6 PM 12:40

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # 733903 (9)

1. Corporation Name

SARASOTA-MANATEE BICYCLE CLUB, INC.

Principal Place of Business	Mailing Address
P. O. BOX 15053 SARASOTA FL 34277	P. O. BOX 15053 SARASOTA FL 34277

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 09/24/1975
3a. Date of Last Report: 05/01/1994
4. FEI Number: 59-2500029 ☐ Applied For ☐ Not Applicable
5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees
7. Nonprofit with IRS 501(c)(3) Tax Exempt Status ☒ **$68.75** Supplemental Fee Not Required
8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☐ Yes ☒ No

2. Principal Place of Business
21
22 Suite, Apt. #, etc.
23 City & State
24 Zip
25 Country

2a. Mailing Address
26
27 Suite, Apt. #, etc.
28 City & State
29 Zip
30 Country

9. Name and Address of Current Registered Agent

SPIVEY, BARRRY F
1549 RINGLING BLVD.
SUITE 600
SARASOTA FL 34230

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City FL 85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS

TITLE	D
NAME	DOLANSKY, JOHN
STREET ADDRESS	3611 ROSLYN RD.
CITY-ST-ZIP	VENICE FL
TITLE	D
NAME	NORIN, MARVIN P
STREET ADDRESS	4960 GULF OF MEXICO DR. A-303
CITY-ST-ZIP	LONGBOAT KEY FL
TITLE	PD
NAME	ARTER, RICHARD
STREET ADDRESS	1007 GULF DRIVE NORTH #218
CITY-ST-ZIP	BRADENTON BEACH FL
TITLE	VD
NAME	FERREIRA, STEVE
STREET ADDRESS	6232 WELLSLEY DRIVE
CITY-ST-ZIP	BRADENTON FL
TITLE	S
NAME	DIETRICH, KERRI
STREET ADDRESS	3281 6TH ST.
CITY-ST-ZIP	SARASOTA FL 34237
TITLE	TD
NAME	AUGUSTINE, JANET
STREET ADDRESS	2304 ROSE COURT
CITY-ST-ZIP	SARASOTA FL

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	PD	☒ Change	☐ Addition
1.2 NAME	STEVEN FERREIRA		
1.3 STREET ADDRESS	6232 WELLSLEY DR		
1.4 CITY-ST-ZIP	BRADENTON, FL 34207		
2.1 TITLE	VD	☒ Change	☐ Addition
2.2 NAME	ALEX BOUDREAU		
2.3 STREET ADDRESS	1123 GUILFORD LN		
2.4 CITY-ST-ZIP	SARASOTA, FL 34234		
3.1 TITLE	S	☒ Change	☐ Addition
3.2 NAME	DONNA BOUDREAU		
3.3 STREET ADDRESS	1123 GUILFORD LN		
3.4 CITY-ST-ZIP	SARASOTA, FL 34234		
4.1 TITLE	TD	☒ Change	☐ Addition
4.2 NAME	MIKE HOWALD		
4.3 STREET ADDRESS	5888 BONAVENTURE PL.		
4.4 CITY-ST-ZIP	SARASOTA, FL 34343		
5.1 TITLE	D	☒ Change	☐ Addition
5.2 NAME	RALPH KERCHEVAL		
5.3 STREET ADDRESS	5906 DEER HOLLOW LN E.		
5.4 CITY-ST-ZIP	SARASOTA, FL 34232		
6.1 TITLE	D	☒ Change	☐ Addition
6.2 NAME	ALAN RODDY		
6.3 STREET ADDRESS	869 SOUTH ORANGE #202		
6.4 CITY-ST-ZIP	SARASOTA, FL 34236		

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Steven W. Ferreira STEVEN W. FERREIRA 5/31/95 (813) 792-8030
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

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