

2001 UNIFORM BUSINESS REPORT (UBR)**DOCUMENT # 733903**

1. Entity Name

SARASOTA-MANATEE BICYCLE CLUB, INC.

Principal Place of Business

P. O. BOX 15053
SARASOTA FL 34277

Mailing Address

P. O. BOX 15053
SARASOTA FL 34277

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

59-2500029

Applied For

Not Applicable

5. Certificate of Status Desired ☐**\$8.75** Additional
Fee Required

6. Name and Address of Current Registered Agent

**BACHMAN, KEN
1254 PORT CRISP ROAD
SARASOTA FL 34242**

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW:
FEE IS \$61.25**9. Election Campaign Financing
Trust Fund Contribution. ☐**\$5.00** May Be
Added to Fees**Make Check Payable to
Department of State**

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BACHMAN, KEN 1254 PORT CRIST ROAD SARASOTA FL 34242	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPD DUNCAN, MARION P.O. BOX 814 N/A ANNA MARIA FL 34216	☒ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD CADWELL, ROBERT 6632 SCHOONER BAY CIRCLE SARASOTA FL 34231	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D ALTON, MARC 6875 MYAKKA VALLEY TRAIL SARASOTA FL 34241	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD MOUNT, ROSALYN 1616 WHITEHEAD DR SARASOTA FL 34232	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD PERRY, JAMES 6618 VIRGINIA CROSSING UNIVERSITY PARK FL 34201	☒ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPD Bill KNUTSON 1740 POCAHONTAS ST SARASOTA, FL 34231	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD DAVID CADY 9316 FIRETHORN PL BRADENTON, FL 34202	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

ROSALYN MOUNT

Date

4/5/01

Daytime Phone #

941-362-4248**FILED**
Apr 23, 2001 8:00 am
Secretary of State

04-23-2001 90110 010 ****61.25

C0050190

DO NOT WRITE IN THIS SPACE

CR2E037 (10/00)