

# FILE NOW: FILING FEE IS \$61.25

NONPROFIT  
CORPORATION  
ANNUAL REPORT  
**1996**



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

**DOCUMENT # 739290 (5)**  
1. Corporation Name  
**SPACECOAST FREEWHEELERS BICYCLE CLUB, INC.**



Principal Place of Business

**166 N ATLANTIC AVE  
COCOA BCH FL 32931**

Mailing Address

**P O BOX 320622  
COCOA BEACH FL 32932-0622  
US**

3. Date Incorporated or Qualified  
**06/08/1977**

3a. Date of Last Report  
**06/28/1995**

2. Principal Place of Business

21

Suite, Apt. #, etc.

22

City & State

23

Zip

Country

24

2a. Mailing Address

26

Suite, Apt. #, etc.

27

City & State

28

Zip

Country

29

Zip

Country

30

4. FEI Number

**NOT APPLICABLE**

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**

8. This corporation has liability for intangible tax under s. 199.032,  
Florida Statutes ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

**HAYES, IRVIN R.  
166 N. ATLANTIC AVE.  
COCOA BEACH FL**

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 617.0502 and 617.1508, 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 617.0503, Florida Statutes.

SIGNATURE

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

(NOTE: Registered Agent signature required when re-registering)

DATE

12. OFFICERS AND DIRECTORS

TITLE

TD

**ELLET, MERLE D  
126 WASHINGTON AVE  
CAPE CANAVERAL FL**

☒ DELETE

NAME

STREET ADDRESS

CITY - ST - ZIP

TITLE

VD

**BLOCK, KATHY  
1750 HIGHLAND AVE  
MELBOURNE FL**

☒ DELETE

NAME

STREET ADDRESS

CITY - ST - ZIP

TITLE

PD

**STALLINGS, DOROTHY  
959 TRINIDAD RD  
COCOA BEACH FL**

☐ DELETE

NAME

STREET ADDRESS

CITY - ST - ZIP

TITLE

D

**ANDERSON, DOROTHY  
345 ORION CT  
MERRITT ISLAND FL**

☒ DELETE

NAME

STREET ADDRESS

CITY - ST - ZIP

TITLE

D

**MATRAZZO, DAN  
P O BOX 3204 NA  
TITUSVILLE FL**

☒ DELETE

NAME

STREET ADDRESS

CITY - ST - ZIP

TITLE

SD

**RASMUSSEN, LARRY  
8703 BAY CT  
CAPE CANAVERAL FL**

☐ DELETE

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