


**2003 NOT-FOR-PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
Aug 04, 2003 8:00 am
Secretary of State

05-02-2003 90725 038 ***61.25

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DOCUMENT # N02000004063
1. Entity Name
PALM BEACH MOUNTAIN BIKE ASSOCIATION INC.



Principal Place of Business: 110 WEST 23RD STREET, RIVIERA BEACH FL 33404-5322
Mailing Address: 110 WEST 23RD STREET, RIVIERA BEACH FL 33404-5322

2. Principal Place of Business: PO Box 428
3. Mailing Address: PO Box 428
Suite, Apt. #, etc.

City & State: Palm Beach, FL
City & State: Palm Beach, FL
Zip: 33480
Country: USA

4. FEI Number: 82-0546355
Applied For: Not Applicable
5. Certificate of Status Desired: \$8.75 Additional Fee Required



CHECK HERE IF MAKING CHANGES

8. Name and Address of Current Registered Agent
KUHARCIC, JOSEPH
1211 THE PLAZA
SINGER ISLAND FL 33404-4740

7. Name and Address of New Registered Agent
Name: _____
Street Address (P.O. Box Number is Not Acceptable): _____
City: _____ FL Zip Code: _____

9. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE: _____ (NOTE: Registered Agent signature required when resigning) DATE: _____

FILE NOW: FEE IS \$81.25

8. Election Campaign Financing Trust Fund Contribution. \$5.00 May Be Added to Fees

Make Check Payable to Florida Department of State

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	POEO GALLANT, RICHARD 110 WEST 23RD STREET RIVIERA BEACH FL 33404-5522	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V MAYER, CHES 232 SEABREEZE LANE PALM BEACH FL 33480	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S HOWARD, STEPHANIE 1671 BRANDYWINE ROAD #2314 WEST PALM BEACH FL 33409	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T SUTTON, SCOTT 805 SIXTH WAY WEST PALM BEACH FL 33407	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D NESOR, TONY 6884 SPIDER LILY LANE LANTANA FL 33482	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE NAME STREET ADDRESS CITY-ST-ZIP	Director Joby Butterworth 7795 Griswold St Lakewood, FL 33462	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> 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 817, 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: Richard Gallant President April 23, 2003 561 275973

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E037 (10/02)