

# **2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N06000007934

**FILED**  
**Apr 30, 2011**  
**Secretary of State**

**Entity Name:** WEST COAST BIKE RALLY ASSOCIATION, INC

**Current Principal Place of Business:**

8437 TUTTLE AVE  
316  
SARASOTA, FL 34243

**New Principal Place of Business:**

**Current Mailing Address:**

5410 LAKE PADDOCK CIRCLE  
PARRISH, FL 34219

**New Mailing Address:**

**FEI Number:** 87-0777366

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

ANDRESS, CATHRYN L MRS  
5410 LAKE PADDOCK CIRCLE  
PARRISH, FL 34219 US

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

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

**OFFICERS AND DIRECTORS:**

Title: PRES  
Name: ANDRESS, CATHRYN L MRS  
Address: 8437 TUTTLE AVENUE  
City-St-Zip: SARASOTA, FL 34243

Title: VP  
Name: HOUSER, TOM MR  
Address: 8437 TUTTLE AVENUE  
City-St-Zip: SARASOTA, FL 34243

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: CATHRYN L. ANDRESS

PRES

04/30/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date