

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000140647

FILED
Mar 28, 2009
Secretary of State

Entity Name: BIKES PLUS OF NORTHWEST FLORIDA, INC.

Current Principal Place of Business:

3682 BARRANCAS AVENUE
PENSACOLA, FL 32507 US

New Principal Place of Business:

Current Mailing Address:

2707 SUNRUNNER LANE
GULF BREEZE, FL 32563 US

New Mailing Address:

FEI Number: 54-2133680

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HOLLMAN, ERIC
2707 SUNRUNNER LANE
GULF BREEZE, FL 32563 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: HOLLMAN, ERIC W
Address: 3929 NAVY BLVD
City-St-Zip: PENSACOLA, FL 32507

Title: D () Delete
Name: HOLLMAN, CARLA L
Address: 3929 NAVY BLVD
City-St-Zip: PENSACOLA, FL 32507

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: HOLLMAN, ERIC W
Address: 3682 BARRANCAS AVE
City-St-Zip: PENSACOLA, FL 32507

Title: D (X) Change () Addition
Name: HOLLMAN, CARLA L
Address: 3682 BARANCAS AVE
City-St-Zip: PENSACOLA, FL 32507

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: CARLA L HOLLMAN

D

03/28/2009

Electronic Signature of Signing Officer or Director

Date