

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000058335

Entity Name: GLORY CYCLES, INC.

FILED
Jun 23, 2009
Secretary of State

Current Principal Place of Business:

831 N. MILLS AVE
ORLANDO, FL 32803

New Principal Place of Business:

Current Mailing Address:

831 N. MILLS AVE
ORLANDO, FL 32803

New Mailing Address:

FEI Number: 04-3650202

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DE SOUSA, CLIVE WILLIAM
1705 CHOCTAW TR
MAITLAND, FL 32751 US

Name and Address of New Registered Agent:

BATES, EDWARD D
303 GENIUS DR
WINTER PARK, FL 32789 US

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: EDWARD BATES

06/23/2009

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PVST () Delete
Name: DE SOUSA, CLIVE WILLIAM
Address: 1705 CHOCTAW TR
City-St-Zip: MAITLAND, FL 32751

Title: D () Delete
Name: DE SOUSA, CLIVE WILLIAM
Address: 1705 CHOCTAW TR
City-St-Zip: MAITLAND, FL 32751

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PVST (X) Change () Addition
Name: DE SOUSA, CLIVE W PRES
Address: 304 HAY HILL CT
City-St-Zip: ELGIN, SC 29045

Title: TRES (X) Change () Addition
Name: FOX, CRISITN M
Address: 304 HAY HILL CT.
City-St-Zip: ELIGIN, SC 29045

Title: VP () Change (X) Addition
Name: BATES, EDWARD D
Address: 303 GENIUS DR
City-St-Zip: WINTER PARK, FL 32789

Title: SEC () Change (X) Addition
Name: BATES, JENNIFER F
Address: 303 GENIUS DR
City-St-Zip: WINTER PARK, FL 32789

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: CLIVE DE SOUSA

PVST

06/23/2009

Electronic Signature of Signing Officer or Director

Date