FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 390395

1. Corporation Name

COLONIAL CYCLES OF ORLANDO, INC.

Principal Place	of Business
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Mailing Address

FILED Apr 21, 1999 8:00 am Secretary of State

04-21-1999 90177 006 ***150.00



7000 OLD CHENEY HWY ORLÁNDO FL 32807		7000 OLD CHENEY HWY ORLANDO FL 32807				DO NOT WRITE IN THIS SPACE			
						3. Date incorporated or Qualifed 01/01/1972			
2. Principal Plac	ce of Business	2a. Mailing Ad	dress			4. FEI Number	ļ	Applied For	
1		26				59-1371026		Not Applicable	
Suite, Apt. #,	etc.	Suite, Apt.	#, etc.			5. Certificate of Status Desired	•	75 Additional ee Required	
City_&_State_		City & Stat	le		بەنىنىنىنىن مەنىسىنىنىنىن	6. Election Campaign Financing Trust Fund Contribution	\$ 5	.00 May:Be	
Zip	Country 25	Zip 29	Zip Country			This corporation owes the current year In Personal Property Tax.	ntangible Ye:	_	
9. Name and Address of Current Registered Agent					10. Name and Address of New Registered Agent				
RDITE	FT I ADDV			81	Name				
BRUETT,LARRY 1103 OVERDALE ST			82	Street Addres	et Address (P.O. Box Number is Not Acceptable)				
ORLAN	NDO FL 32807			83					
				84	City		85	Zip Code	
11 Pursuant to	the provisions of Sections 607	0502 and 607 1508. Fig	orida Statutes, the a	bove	-named coroor	ation submits this statement for the purpose of	of changi	ng 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 607.0505, Florida Statutes.

SIGNATURE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. OFFICERS AND DIRECTORS 13. PD ☐ DELETE 1.1 TITLE ☐ Change ☐ Addition TITLE **BRUETT.LARRY** 1.2 NAME NAME 1103 OVERDALE ST. STREET ADDRESS 1.3 STREET ADDRESS ORLANDO FL 1.4 CITY-ST-ZIP CITY-ST-ZIP Addition ☐ Change ☐ DELETE TITLE 2.1 TITLE NAME 2.2 NAME STREET ADORESS 2.3 STREET ADDRESS CITY-ST-ZIP 2.4 CITY-ST-ZIP DELETE Change ☐ Addition 3.1 TITLE TITLE NAME 3.2 NAME 3.3 STREET ADDRESS STREET ADDRESS 3.4. CITY-ST-ZIP CITY-ST-ZIP Addition Change ☐ DELETE 4.1 TITLE TITLE 4. 2 NAME NAME 4.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 4.4 CITY-ST-ZIP DELETE ☐ Change ☐ Addition 5.1 TITLE TITLE 5.2 NAME NAME 5.3 STREET ADDRESS STREET ADDRESS 5.4 CITY-ST-ZIP CITY-ST-ZIP 6.1 TITLE Change DELETE ☐ Addition TITLE 62 NAME NAME 6.3 STREET ADDRESS STREET ADDRESS 6.4 CITY-ST-ZIP CITY-ST-ZIP -

14. 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 annual report or supplemental annual 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 607, Florida Statutes; and that my name appears in address, with all other like empowered.

CR2E034 (11/98)