1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 720650

1. Corporation Name

ST. PETERSBURG BICYCLE CLUB, INCORPORATED

Principal Place of Business
P.O. BOX 76023 ST PETERSBURG FL 33734

Mailing Address

P.O. BOX 76023 ST PETERSBURG FL 33734

FILED Apr 09, 1999 8:00 am § Secretary of State

04-09-1999 90009 029 ****61.25

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		1 2a Maillen Address			3. Date Incorporated or Qualifed
	A Place of Business	2a. Mailing Address		<u> </u>	04/02/1971
21		26			4. FEI Number Applied For
 ,	pt. #, etc.	Suite, Apt. #, etc.			59-2454681 Not Applicable
22		27			39-2434081 [Not Applicable]
City & :	State	City & State			5. Certificate of Status Desired Fee Required
Zip	Country	Zip	Country		6. Election Campaign Financing \$5.00 May Be
24	25	29 30	<u> </u>		Trust Fund Contribution Added to Fees
	9. Name and Address of Current	Registered Agent			10. Name and Address of New Registered Agent
			81	Name	
HIOTIS	ANASTASIA C		82	Street A	ddress (P.O. Box Number is Not Acceptable)
1234 B	EACH DRIVE N E .		83		
ST PET	ERSBURG FL 33701		03		
			84	City	FL 85 Zip Code
11 Dureu	ent to the provisions of Sections 617 0502	and 617 1508 Florida Statutes.	the above	e-named c	orporation submits this statement for the purpose of changing its registered
office	or registered agent, or both, in the State of	f Florida. Such change was auth	onzed by	the corpor	ration's board of directors. I hereby accept the appointment as registered
agent	I am familiar with, and accept the obligation	ons of, Section 617.0303, Piorios	a Statutes		
SIGNATU	RE Signature, typed or printed name of registered agent	and title if applicable. (NOTE: Re	gistered Age	nt signature re	quired when reinstating) DATE
12.	OFFICERS AND	DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	P	☐ DELETE	1.1 TITLE		△ Shange Addition
NAME	MCNULTY, PATRICK J		1.2 NAME		FELIX CASTILLO
STREET ADDR			1.3 STREE	TADDRESS	12268 70TH ST. N
CITY-ST-ZIP	TAMPA FL 33629		1.4 CITY-S	T-ZIP	LAKGO, ROKIDA 33773
TITLE	V 7	☐ DELETE	2.1 TITLE		Addition
NAME	MCLEAN, JIM		2.2 NAME		PAUL CONRAD 11455 119TH PLACE N
	MOLLEY, Sim		23 STREE	TADDRESS	11455 119TH PLACE N
CITY-ST-ZIP	TO COLLAR TO COL		2. 4 CITY-5	1	LARGO, ROLIDA 33778
TITLE	C DELETE		3.1 TITLE		↑ Change Addition
NAME	LUMPNOED MADCADET A	_	3.2 NAME		JOSEPH LINDQUIST
	HUNTINGER, MARGARET A			T ADDRESS	6795 14th St. S.
STREET ADDR	1100 0001100111001010		3.4. CITY-5		ST ATTESBULG, FLORIDA 33705
CITY-ST-ZIP	ST PETERSBURG FL 33703	□ DELETE	4.1 TITLE	31+ZIF	Change Addition
TITLE	S S S S S S S S S S S S S S S S S S S		4.1 MAME		MARY FLANCIS PAZON
NAME	HIOTIS, ANASTASIA C			T ADDRESS	4800 BLITTANY DRIVE
	1204 DEADIT DINAC IA E				S. REPORTED AG FLORING 33715
CITY-ST-ZIP	OTHER TENEDS TO THE TENEDS TO		4.4 CITY-S	T-ZIP	Change Addition
TITLE	D		5.1 TITLE 5.2 NAME		Towards Duogram
NAME	SMITH, MICHAEL			T +0000000	
STREET ADD	10000 1111 0111221 11011111, 20	04		TADDRESS	·
CITY-ST-ZIP	ST PETERSBURG FL 33716		5.4 CITY- S	11-ZIP	Chora Addition
TITLE	D	☐ DELETE	6.1 TITLE		Change Addition
NAME	HAWK, JAN		6.2 NAME		
STREET ADDR	ESS 1400 3RD STREET SOUTH		6.3 STREE	TADDRESS	

ST PETERSBURG FL 33701 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 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: