

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 720650

FILED
Jul 09, 2008
Secretary of State

Entity Name: ST. PETERSBURG BICYCLE CLUB, INCORPORATED

Current Principal Place of Business:

115 13TH AVE NORTHEAST
ST PETERSBURG, FL 33701 US

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 76023
ST PETERSBURG, FL 33734 US

New Mailing Address:

FEI Number: 59-2454681 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

MCNULTY, PATRICK J
3615 SOUTH LOIS AVE
TAMPA, FL 33629 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: P () Delete
Name: MENNE, WENDY
Address: 9650 103 AVE., N
City-St-Zip: REDINGTON BEACH, FL 33704

Title: V () Delete
Name: PATRICK, RUTA
Address: 115 13TH AVE N
City-St-Zip: SAINT PETERSBURG, FL 33701

Title: S () Delete
Name: MCNULTY, PATRICK
Address: 3615 SOUTH LOIS AVE
City-St-Zip: TAMPA, FL 33629

Title: T () Delete
Name: BUTTS, TIM
Address: 11601 4TH ST., N
City-St-Zip: SAINT PETERSBURG, FL 33716

Title: T () Delete
Name: LINDQUIST, JOSEPH
Address: 6795 14ST SO
City-St-Zip: SAINT PETERSBURG, FL 33705

Title: T () Delete
Name: YETMAN, LYNN
Address: 249 NAUTILUS WAY
City-St-Zip: TREASURE ISLAND, FL 33706 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: BUTTS, TIM
Address: 11601 4TH ST. NORTH
City-St-Zip: ST. PETERSBURG, FL 33716

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: T (X) Change () Addition
Name: MENNE, WENDY
Address: 9650 103 AVE. NORTH
City-St-Zip: REDINGTON BEACH, FL 33704

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: PATRICK J. MCNULTY

T

07/09/2008

Electronic Signature of Signing Officer or Director

_____ Date