

# 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 720650

FILED  
Feb 17, 2010  
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 ( )

**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  
Name: BUTTS, TIM  
Address: 7507 SOUTH MASCOTTE ST.  
City-St-Zip: TAMPA, FL 33616

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

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

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

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

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

I hereby 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 all other like empowered.

SIGNATURE: JOAN M FLAHERTY

TREA

02/17/2010

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date