


2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 24, 2006 8:00 am
Secretary of State

04-24-2006 90366 017 ****61.25

DOCUMENT # 736012

1. Entity Name
 PENSACOLA FREEWHEELER'S BICYCLE CLUB, INC.



Principal Place of Business
 60 STAR LAKE DRIVE
 PENSACOLA, FL 32507

Mailing Address
 2009 UNIVERSITY ST
 PENSACOLA, FL 32504-130 US

60029960



02152006 No Chg-NP CR2E037 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number 59-2773049	Applied For Not Applicable
-----------------------------	-------------------------------

5. Certificate of Status Desired **\$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

TURNER, HUGH E
 2009 UNIVERSITY ST
 PENSACOLA, FL 32504

DO NOT WRITE IN THIS SPACE

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

Filing Fee is \$61.25
Due by May 1, 2006

9. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SDT TURNER, HUGH 2009 UNIVERSITY ST PENSACOLA, FL 325048130
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP LLOYD MENGEL 7889 CHESTERFIELD RD PENSACOLA, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D VEASEY, JOHN 7072 APPLE ST PENSACOLA, FL 32503
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DVP BROWN, LARRY L 5725 MIFFLIN AVE PENSACOLA, FL 32526
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D TINA AARTS 7072 APPLE ST PENSACOLA, FL 32503
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

DO NOT WRITE IN THIS SPACE

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *[Signature]* **1 MARCH '06** ⁸⁵⁰ **478-2373**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #