

# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 739290

FILED  
Feb 04, 2007  
Secretary of State

**Entity Name:** SPACECOAST FREEWHEELERS BICYCLE CLUB, INC.

**Current Principal Place of Business:**

JOSEPH A GRINARML  
1660 DAVIS DR  
MERRITT ISLAND, FL 32952

**New Principal Place of Business:**

**Current Mailing Address:**

P O BOX 320622  
COCOA BEACH, FL 329320622 US

**New Mailing Address:**

**FEI Number:** 59-3705061

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

GRINARML, JOSEPH A  
1660 DAVIS DR  
MERRITT ISLAND, FL 32952 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: VP ( ) Delete  
Name: MOLNAR, MATHEW  
Address: 166 N ATLANTIC AVE  
City-St-Zip: COCOA BEACH, FL 32926

Title: P ( ) Delete  
Name: GRINARML, JOSEPH A  
Address: 1660 DAVIS DR  
City-St-Zip: MERRITT ISLAND, FL 32952

Title: R ( ) Delete  
Name: JORDAN, HERB  
Address: 373 W EXETER ST  
City-St-Zip: SATELLITE BEACH, FL 32937

Title: T ( ) Delete  
Name: HEIDERSBACH, DIANNE  
Address: 425 BUCHANAN AVE #501  
City-St-Zip: CAPE CANAVERAL, FL 32920

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: P (X) Change ( ) Addition  
Name: FORREST, AMBER  
Address: 18 ROCKLEDGE AVE  
City-St-Zip: ROCKLEDGE, FL 32955

Title: VP (X) Change ( ) Addition  
Name: MOLAR, MATTHEW  
Address: 166 N. ATLANTIC AVE  
City-St-Zip: COCOA BEACH, FL 32926

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 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: DIANNE K. HEIDERSBACH

TREA

02/04/2007

Electronic Signature of Signing Officer or Director

Date