

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Apr 23, 2005 08:00 AM**  
**Secretary of State**

**DOCUMENT # G11598**

1. Entity Name  
**BEACH SPORTCYCLES, INC.**



Principal Place of Business

1127 W KING ST  
COCOA, FL 32922

Mailing Address

BUFFALOE, TIMOTHY  
1127 W. KING STREET  
COCOA, FL 32922 US



02072005 No Chg-P CR2E034 (10/03)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number  
59-2257109

Applied For  
Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional  
Fee Required**

6. Name and Address of Current Registered Agent

JACOBUS, BRUCE W.  
505 N. ORLANDO AVENUE  
COCOA BEACH, FL 32931

**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 GEORGE F. BUFFALOE SR.

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

April 20, 2005

DATE

**FILE NOW!!! FEE IS \$150.00  
After May 1, 2005 Fee will be \$550.00**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00 May Be  
Added to Fees**

000000326255  
04/23/05-80049-009 150.00

10. OFFICERS AND DIRECTORS

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP  
VD  
BUFFALOE, TIMOTHY  
846 BERKSHIRE DR  
ROCKLEDGE, FL

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP  
PD  
BUFFALOE, GEORGE F. S  
303 FIRST AVENUE  
INDIALANTIC, FL

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP  
SD  
BUFFALOE, GEORGE F. J  
4254 TURTLEWOOD RD.  
MELBOURNE, FL

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP  
TD  
BUFFALOE, RODNEY  
989 ALBTON ST N.W.  
PALM BAY, FL

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP

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 exemption stated in Section 119.07(3)(i), 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 607, 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: GEORGE F. BUFFALOE SR.

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/15/2005 (321) 631-5571

Date

Daytime Phone #