2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 28, 2006
Secretary of State

DOCUMENT# G53609

Entity Name: J.P. CYCLES, INC.

Current Principal Place of Business:

3401 HWY 17-92
P.O. BOX 522255
LONGWOOD, FL 32752

New Principal Place of Business:

1200 RINEHART ROAD
SANFORD, FL 32771

Current Mailing Address:

3401 HWY 17-92
P.O. BOX 522255
LONGWOOD, FL 32752

New Mailing Address:

3505 N US HWY 17-92
P.O. BOX 522255
LONGWOOD, FL 32752

FEI Number: 59-2316034 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

HUMPHRIES, GREG
300 SOUTH ORANGE AVENUE
SUITE 100
ORLANDO, FL 328013373 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

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: P ( ) Delete
Name: PARKS, STEPHEN R
Address: 3401 N. US HWY 17-92
City-St-Zip: LONGWOOD, FL 32750

Title: V ( ) Delete
Name: PARKS, JACK,
Address: 13824 CYPRESS VILL CR
City-St-Zip: TAMPA, FL

Title: P ( ) Delete
Name: PARKS, STEPHEN R.,
Address: 3505 N. HWY 17-92
City-St-Zip: LONGWOOD, FL 32750

Title: ST ( ) Delete
Name: CORLESS, GREG A
Address: 3505 N. HWY 17-92
City-St-Zip: LONGWOOD, FL 32750

Title: DGM (X) Delete
Name: MULLINS, KIRBY
Address: 3401 N. US HWY 1792
City-St-Zip: LONGWOOD, FL 32750

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: P (X) Change ( ) Addition
Name: PARKS, JACK,
Address: 13824 CYPRESS VILL CR
City-St-Zip: TAMPA, FL

Title: V (X) Change ( ) Addition
Name: PARKS, STEPHEN R.,
Address: 3505 N. HWY 17-92
City-St-Zip: LONGWOOD, FL 32750

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

SIGNATURE: GREG CORLESS ST 02/28/2006

Electronic Signature of Signing Officer or Director — Date