

2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# J15965

FILED
Apr 18, 2012
Secretary of State

Entity Name: THE BICYCLE CENTER OF KEY WEST, INC.

Current Principal Place of Business:

523 TRUMAN AVE.
KEY WEST, FL 33040

New Principal Place of Business:

Current Mailing Address:

C/O CHARLES ROBINSON
204 KEY HAVEN RD.
KEY WEST, FL 33040

New Mailing Address:

FEI Number: 59-2681920

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WILLIS, GUY (TONY) A RA
2432 FLAGLER AVENUE
KEY WEST, FL 33040 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: MGR
Name: ROBINSON, CHARLES R
Address: 204 KEY HAVEN RD.
City-St-Zip: KEY WEST, FL 33040

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

SIGNATURE: CHARLES ROBINSON

MGR

04/18/2012

Electronic Signature of Signing Officer or Director

Date