

# 2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# K16752

FILED  
Feb 20, 2011  
Secretary of State

Entity Name: CYCLE LOGICAL DISTRIBUTORS, INC.

## Current Principal Place of Business:

% A. ROBERT CUMMING  
3233 S.W. 42ND AVE.  
PALM CITY, FL 34990

## New Principal Place of Business:

% A. ROBERT CUMMING  
12901 SE LAUREL VALLEY LN  
HOBE SOUND, FL 33455

## Current Mailing Address:

% A. ROBERT CUMMING  
12901 SE LAUREL VALLEY LN  
HOBE SOUND, FL 33455 US

## New Mailing Address:

% A. ROBERT CUMMING  
12901 SE LAUREL VALLEY LN  
HOBE SOUND, FL 33455

FEI Number: 65-0034781

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

CUMMING, A. ROBERT  
3233 SW 42ND AVE  
PALM CITY, FL 34990 US

## Name and Address of New Registered Agent:

CUMMING, A. ROBERT  
12901 SE LAUREL VALLEY LN  
HOBE SOUND, FL 33455 US

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:

02/20/2011

Electronic Signature of Registered Agent

Date

## OFFICERS AND DIRECTORS:

Title: DPT  
Name: CUMMING, A. ROBERT  
Address: 12901 SE LAUEL VALLEY LANE  
City-St-Zip: HOBE SOUND, FL 33455

Title: DVS  
Name: CUMMING, ANDREA J.  
Address: 12901 SE LAUEL VALLEY LANE  
City-St-Zip: HOBE SOUND, FL 33455

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: A. ROBERT CUMMING

PRES

02/20/2011

Electronic Signature of Signing Officer or Director

Date