

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000006218

FILED
Feb 05, 2004
Secretary of State**Entity Name:** CYCLEFEST INC.**Current Principal Place of Business:**7205 WEST LAKE DRIVE
WEST PALM BEACH, FL 33406**New Principal Place of Business:****Current Mailing Address:**7205 WEST LAKE DRIVE
WEST PALM BEACH, FL 33406**New Mailing Address:****FEI Number:** 65-1040765**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**HASSELL, MARK
7205 WEST LAKE DR.
WEST PALM BEACH, FL 33406 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: D () Delete
Name: HASSELL, MARK
Address: 7205 WEST LAKE DRIVE
City-St-Zip: WEST PALM BEACH, FL 33406

Title: D () Delete
Name: TAGUE, MIKE
Address: 7205 WEST LAKE DRIVE
City-St-Zip: WEST PALM BEACH, FL 33406

Title: D () Delete
Name: VANDERLAAN, DAVE
Address: 7205 WEST LAKE DRIVE
City-St-Zip: WEST PALM BEACH, FL 33406

Title: D () Delete
Name: PURDY, MIKE
Address: 7205 WEST LAKE DRIVE
City-St-Zip: WEST PALM BEACH, FL 33406

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

Title: D () Change (X) Addition
Name: BONE, BILL
Address: 7205 WEST LAKE DR
City-St-Zip: WEST PALM BEACH, FL 33406

I hereby certify that the information supplied with this filing does not qualify for the 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 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: DAVID VANDERLAAN

D

02/05/2004

Electronic Signature of Signing Officer or Director

Date