

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000003724

FILED
May 05, 2004
Secretary of State**Entity Name:** LADY CYCLE RIDERS, INC.**Current Principal Place of Business:**1366 LEROY COURT
APOPKA, FL 32703**New Principal Place of Business:****Current Mailing Address:**1366 LEROY COURT
APOPKA, FL 32703**New Mailing Address:****FEI Number:** 57-7735496**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**REED, LORRAINE K
6007 GROVELINE DRIVE
ORLANDO, FL 32810 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: WASHINGTON, JOEAN F
Address: 1366 LEROY COURT
City-St-Zip: APOPKA, FL 32703**Title:** D () Delete
Name: BAILEY, LINDA
Address: 1366 LEROY COURT
City-St-Zip: APOPKA, FL 32703**Title:** D () Delete
Name: POUND, KERRI
Address: 5546 GOLDENWOOD DRIVE
City-St-Zip: ORLANDO, FL 32817**Title:** D () Delete
Name: CLAYTON, GWENDOLYN
Address: 1217 PAUL STREET
City-St-Zip: ORLANDO, FL 32808**Title:** D () Delete
Name: MESA, MARIA
Address: 1718 HART LANE
City-St-Zip: ORLANDO, FL 32804**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
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City-St-Zip:**Title:** () Change () Addition
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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 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: JOEAN F. WASHINGTON

PRES

05/05/2004

Electronic Signature of Signing Officer or Director

Date