

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000003724

FILED
Apr 21, 2009
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:

WASHINGTON, JOREAN F
1366 LEROY COURT
APOPKA, FL 32703 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: VICE () Delete
Name: WASHINGTON, JOREAN F
Address: 1366 LEROY COURT
City-St-Zip: APOPKA, FL 32703

Title: PRES () Delete
Name: BAILEY, LINDA
Address: 4575 EMERSON PARK DR. APT. #105
City-St-Zip: ORLANDO, FL 32739

Title: SECR () Delete
Name: POUND, KERRI
Address: 5546 GOLDENWOOD DRIVE
City-St-Zip: ORLANDO, FL 32817

Title: TRES () Delete
Name: MESA, MARIA
Address: 1718 HART LANE
City-St-Zip: ORLANDO, FL 32804

Title: PARL () Delete
Name: DIBARTOLO, MOLLIE
Address: 4575 EMERSON PARK DR. APT. #105
City-St-Zip: ORLANDO, FL 32839

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: PRES (X) Change () Addition
Name: BAILEY, LINDA L
Address: 3979 CESARE ST
City-St-Zip: ORLANDO, FL 32839

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

Title: TRES (X) Change () Addition
Name: FARMER, LAKEISHA D
Address: 1366 LEROY CT
City-St-Zip: APOPKA, FL 32703

Title: PARL (X) Change () Addition
Name: DIBARTOLO, MOLLIE
Address: 3979 CESARE ST
City-St-Zip: ORLANDO, FL 32839

I hereby certify that the information supplied with this filing does not qualify 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: WASHINGTON

VICE

04/21/2009

Electronic Signature of Signing Officer or Director

Date