

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000005745

FILED
Apr 29, 2005
Secretary of State

Entity Name: RAZORWIRE CYCLE INC

Current Principal Place of Business:

4402 GRISSOM RD,
DELEON SPRINGS, FL 32130 US

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 2058
DELEON SPRINGS, FL 32130 US

New Mailing Address:

FEI Number:

FEI Number Applied For (X)

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HALL, BRUCE W
4402 GRISSOM RD.
DELEON SPRINGS, FL 32130 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: P () Delete
Name: HALL, BRUCE W
Address: P.O.BOX 2058
City-St-Zip: DELEON SPRINGS, FL 32130 US

Title: VP () Delete
Name: LESIZZA, DAVE
Address: 170 W.CRAIG AVE.
City-St-Zip: LAKE HELEN, FL 32744 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
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: BRUCE W. HALL

P

04/29/2005

Electronic Signature of Signing Officer or Director

Date