

2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# N20402

FILED
Mar 24, 2003
Secretary of State

Entity Name: FLORIDA BICYCLE COALITION, INC.

Current Principal Place of Business:

15060 TAMARIND CAY CT.
804
FT. MYERS, FL 33908 US

New Principal Place of Business:

Current Mailing Address:

15060 TAMARIND CAY CT.
804
FT. MYERS,, FL 33908 US

New Mailing Address:

FEI Number: 59-2849769

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BAUER, KATHLEEN D
15060 TAMARIND CAY CT.
804
FT. MYERS, FL 33908 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: WOOLLEY, DAN
Address: 1279 MCNEIL
City-St-Zip: N FT MYERS, FL 33903

Title: S () Delete
Name: BAUER, KATHLEEN
Address: 15060 TAMARIND CAY COURT #804
City-St-Zip: FORT MYERS, FL 33903

Title: T () Delete
Name: WOOLLEY, JUDY
Address: 1279 MCNEIL
City-St-Zip: N. FT. MYERS, FL 33903 US

Title: VP () Delete
Name: HILL, MARTY
Address: 5438 1ST AVENUE
City-St-Zip: FORT MYERS, FL 33907

Title: D () Delete
Name: WILLIAMS, DAVID C
Address: 4622 DELEON STREET B108
City-St-Zip: FORT MYERS, FL 33907

Title: D () Delete
Name: JOHNSON, STEVE
Address: 1802 WHITECAP CIRCLE
City-St-Zip: N FT MYERS, FL 33903

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: WOOLLEY, DAN
Address: 1279 MCNEIL
City-St-Zip: N FT MYERS, FL 33903

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: P (X) Change () Addition
Name: WILLIAMS, DAVID C
Address: 4622 DELEON STREET B108
City-St-Zip: FORT MYERS, FL 33907

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: KATHLEEN BAUER

S

03/24/2003

Electronic Signature of Signing Officer or Director

Date