## 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N20754

FILED Mar 24, 2008 Secretary of State

Entity Name: THE BOCA RATON BICYCLE CLUB, INC.

**Current Principal Place of Business: New Principal Place of Business:** 

PO BOX 810744 6707 CONCH COURT

BOCA RATON, FL 33481744 US BOYNTON BEACH, FL 33437 US

**Current Mailing Address: New Mailing Address:** 

P.O. BOX 810744

BOCA RATON, FL 33481744 US

FEI Number: 65-0040610 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

Name and Address of New Registered Agent: Name and Address of Current Registered Agent:

DICKLER, DAVID RESNICK, PAUL

22233 LARKSPUR TRAIL 4740 SOUTH OCEAN BLVD.

BOCA RATON, FL 33433 APT. 605 US HIGHLAND BEACH, FL 33487 US

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: PAUL RESNICK 03/24/2008

> Electronic Signature of Registered Agent Date

> > City-St-Zip:

## **OFFICERS AND DIRECTORS:**

BOYNTON BEACH, FL 33437

City-St-Zip:

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

**PRES** () Delete () Change () Addition

SABIN, ROBERT Name: Name: 6707 CONCH CT. Address: Address:

Title: Title: VΡ

() Delete (X) Change ( ) Addition MELSTTE, RICHARD Name: ZISS, RANDY Name:

Address: PO BOX 970606 Address: 375 SW 17TH STREET City-St-Zip: BOCA RATON, FL 33497 City-St-Zip: BOCA RATON, FL 33432

Title: TREA () Delete Title: **TREA** (X) Change ( ) Addition

HESTER, PAMELA RESNICK, PAUL Name: Name:

6095 GLENDALE DR. 4740 SOUTH OCEAN BLVD. APT. 605 Address: Address:

City-St-Zip: BOCA RATON, FL 33433 City-St-Zip: HIGHLAND BEACH, FL 33487

Title: () Delete Title: SEC (X) Change ( ) Addition

Name: KATTEN, ROBERT Name: BLUESTEIN, VICKI Address:

13147 ALISO BEACH DRIVE 19670 SAWGRASS CIR. #3104 Address: City-St-Zip: BOCA RATON, FL 33434 City-St-Zip: DELRAY BEACH, FL 33446

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: PAUL RESNICK **TREA** 03/24/2008