

# **2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N27844

**FILED**  
**Apr 15, 2010**  
**Secretary of State**

**Entity Name:** CALOOSA RIDERS BICYCLE CLUB, INC.

**Current Principal Place of Business:**

12791 VISTA PINE CIRCLE  
FT MYERS, FL 33913

**New Principal Place of Business:**

**Current Mailing Address:**

P O BOX #870  
FT MYERS, FL 33902

**New Mailing Address:**

**FEI Number:** 65-0070971

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

RODGERS, STEVE  
12791 VISTA PINE CIRCLE  
FT MYERS, FL 33913 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  
Name: SWANSON, MICHAEL  
Address: 2710 DEL PRADO BLVD S #2-115  
City-St-Zip: CAPE CORAL, FL 33904

Title: VP  
Name: COLVER, DAVID  
Address: 3724 SURFSIDE BLVD  
City-St-Zip: CAPR CORAL, FL 33914

Title: S  
Name: LAFEHR, RENEE  
Address: 2317 SE 5TH CT  
City-St-Zip: CAPE CORAL, FL 33990

Title: T  
Name: RODGERS, STEVE  
Address: 12791 VISTA PINE CIRCLE  
City-St-Zip: FT MYERS, FL 33913

I hereby 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 all other like empowered.

SIGNATURE: STEVE RODGERS

T

04/15/2010

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date