

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N37163

FILED
Feb 03, 2009
Secretary of State

Entity Name: SUWANNEE BICYCLE ASSOCIATION, INC.

Current Principal Place of Business:

10570 BRIDGE STREET
WHITE SPRINGS, FL 32096

New Principal Place of Business:

Current Mailing Address:

228 ST AUGUSTINE BLVD
JACKSONVILLE BEACH, FL 32250

New Mailing Address:

FEI Number: 59-3004468 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

SHORE, RICHARD
228 ST AUGUSTINE BLVD
JACKSONVILLE BEACH, FL 32250 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: TD () Delete
Name: SHORE, RICHARD
Address: 228 ST AUGUSTINE BLVD
City-St-Zip: JACKSONVILLE BEACH, FL 32250

Title: VD () Delete
Name: BENEDETTO, FRANK
Address: 2829 CEDAR CREST DRIVE
City-St-Zip: ORANGE PARK, FL 32073

Title: SD () Delete
Name: TAYLOR, JOY
Address: 4700 SR 16
City-St-Zip: SAINT AUGUSTINE, FL 32092

Title: PD () Delete
Name: FRAWLEY, KIM
Address: 5216 TIMUCUA CIRCLE
City-St-Zip: SAINT AUGUSTINE, FL 32086

Title: D () Delete
Name: CHASE, SCOTT
Address: 6531 NW 37TH TERRACE
City-St-Zip: GAINSVILLE, FL 32658

Title: D () Delete
Name: HARGRAVE, JEANNE
Address: 126 HEATHER WAY
City-St-Zip: ORANGE PARK, FL 32073

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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: D (X) Change () Addition
Name: FRAWLEY, KIM
Address: 5216 TIMUCUA CIRCLE
City-St-Zip: SAINT AUGUSTINE, FL 32086

Title: PD (X) Change () Addition
Name: CHASE, SCOTT
Address: 6531 NW 37TH TERRACE
City-St-Zip: GAINSVILLE, FL 32658

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

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: RICHARD SHORE

TD

02/03/2009

Electronic Signature of Signing Officer or Director

_____ Date