2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 24, 2008
Secretary of State

DOCUMENT# N42324

Entity Name: BIKES FOR TYKES, INC.

Current Principal Place of Business:

% DARROL R. RIFFLE
5950 COPE LANE
NAPLES, FL 33962

New Principal Place of Business:

Current Mailing Address:

% DARROL R. RIFFLE
5950 COPE LANE
NAPLES, FL 33962

New Mailing Address:

FEI Number: 65-0291052 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

RIFFLE, DARROL R.
5950 COPE LANE
NAPLES, FL 33962 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: PTD ( ) Delete
Name: RIFFLE, DARROL R.,
Address: 5950 COPE LANE
City-St-Zip: NAPLES, FL

Title: VD ( ) Delete
Name: O'REILLY, THOMAS
Address: 1023 5TH AVE. N.
City-St-Zip: NAPLES, FL

Title: SD ( ) Delete
Name: RIFFLE, MARTHA A.
Address: 5950 COPE LANE
City-St-Zip: NAPLES, FL

Title: D ( ) Delete
Name: BUTCHER, ROBERT
Address: 1313 OPUNTIA LANE
City-St-Zip: NAPLES, FL

Title: D ( ) Delete
Name: BOND, ROBERT
Address: 1254 13TH STREET N
City-St-Zip: NAPLES, FL 34102

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: ( ) 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 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: THOMAS F O'REILLY VP 04/24/2008

Electronic Signature of Signing Officer or Director — Date