

# FILE NOW: FILING FEE IS \$61.25

NONPROFIT  
CORPORATION  
ANNUAL REPORT  
**1996**



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

**DOCUMENT # N93000003714 (3)**

1. Corporation Name

**P.C. FLYERS BICYCLING CLUB, INC.**



Principal Place of Business

Mailing Address

**PO BOX 15966  
PANAMA CITY FL 32406-5966**

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PANAMA CITY FL 32406-5966**

3. Date Incorporated or Qualified

**08/16/1993**

3a. Date of Last Report

**05/01/1995**

2. Principal Place of Business

2a. Mailing Address

21

26

4. FEI Number

**59-3205010**

Applied For

Not Applicable

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

5. Certificate of Status Desired

☐

**\$8.75 Additional  
Fee Required**

City & State

City & State

23

28

6. Election Campaign Financing  
Trust Fund Contribution

☐

**\$5.00 May Be  
Added to Fees**

Zip

Country

Zip

Country

24

25

29

30

8. This corporation has liability for intangible tax under s. 199.032,  
Florida Statutes ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**ZIMMERMAN, NEVIN J  
221 MCKENZIE AVENUE  
PANAMA CITY FL 32401**

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

**FL**

85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE **D** ☐ DELETE  
NAME **QUESADA, PETER**  
STREET ADDRESS **157 TREASURE PALM DR**  
CITY-ST-ZIP **PANAMA CITY BCH FL 32408**

11 TITLE ☐ Change ☐ Addition  
12 NAME  
13 STREET ADDRESS  
14 CITY-ST-ZIP

TITLE **D** ☒ DELETE  
NAME **GARCIA, CAROS H**  
STREET ADDRESS **2526 LAURIE AVE**  
CITY-ST-ZIP **PANAMA CITY FL 32408**

21 TITLE **VICE PRESIDENT (D)** ☒ Change ☐ Addition  
22 NAME **ED BROWN**  
23 STREET ADDRESS **323 E 2nd St**  
24 CITY-ST-ZIP **PANAMA CITY FL 32401**

TITLE **D** ☒ DELETE  
NAME **HANSEL, CELESTE**  
STREET ADDRESS **727 DRIFWOOD DR**  
CITY-ST-ZIP **LYNN HAVEN FL 32444**

31 TITLE **TREASURER (D)** ☒ Change ☐ Addition  
32 NAME **CAROL FRITCH**  
33 STREET ADDRESS **3 EMERALD LAKE DR.**  
34 CITY-ST-ZIP **PANAMA CITY BEACH FL 32407**

TITLE **D** ☒ DELETE  
NAME **BRANNON, PAUL**  
STREET ADDRESS **7416 LAIRD ST**  
CITY-ST-ZIP **PANAMA CITY BEACH FL 32408**

41 TITLE **NEWSLETTER EDITOR (D)** ☒ Change ☐ Addition  
42 NAME **TOM VONAHLEFELD**  
43 STREET ADDRESS **3 EMERALD LAKE DR.**  
44 CITY-ST-ZIP **PANAMA CITY BEACH FL 32407**

TITLE **D** ☒ DELETE  
NAME **GRIFFIN, NELWYN**  
STREET ADDRESS **909 HWY 2297**  
CITY-ST-ZIP **PANAMA CITY FL**

51 TITLE ☐ Change ☐ Addition  
52 NAME  
53 STREET ADDRESS  
54 CITY-ST-ZIP

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

61 TITLE ☐ Change ☐ Addition  
62 NAME  
63 STREET ADDRESS  
64 CITY-ST-ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**1/17/96**

Date

**904 235 5683**

Daytime Phone #

CR2E037 (12/95)