

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N97000005450

FILED  
Apr 27, 2009  
Secretary of State

Entity Name: FLORIDA BICYCLE ASSOCIATION, INC.

**Current Principal Place of Business:**

20420 NE 132 AVENUE  
WALDO, FL 32694 US

**New Principal Place of Business:**

**Current Mailing Address:**

FLORIDA BICYCLE ASSOCIATION  
PO BOX 718  
WALDO, FL 32694 US

**New Mailing Address:**

20420 NE 132 AVENUE  
WALDO, FL 32694 US

FEI Number: 59-3469746

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

HALLAM, LAURA  
20420 NE 132 AVENUE  
WALDO, FL 32694 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: D ( ) Delete  
Name: HENDERSON, DAVID  
Address: 111 NW FIRST ST.,STE 910  
City-St-Zip: MIAMI, FL 33128

Title: D ( ) Delete  
Name: CLEMENTE, RAPHAEL  
Address: 301 CLEMATIS STREET SUITE 200  
City-St-Zip: WEST PALM BEACH, FL 33401

Title: D ( ) Delete  
Name: BRAVERMAN, DON  
Address: 27 STRATFORD LANE WEST APT A  
City-St-Zip: BOYNTON BEACH, FL 33436

Title: D ( ) Delete  
Name: MOSER, DAN  
Address: 1449 LINHART AVENUE  
City-St-Zip: FT MYERS, FL 33901

Title: D ( ) Delete  
Name: DIEZ, STEVE  
Address: 20 NORTH MAIN STREET ROOM 262  
City-St-Zip: BROOKSVILLE, FL 34601

Title: D ( ) Delete  
Name: WILSON, MICHAEL R  
Address: 737 S MILLS AVENUE  
City-St-Zip: ORLANDO, FL 32801

**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: DIEZ, STEVE  
Address: 20 N MAIN STREET ROOM 262  
City-St-Zip: BROOKSVILLE, FL 34601

Title: D (X) Change ( ) Addition  
Name: CRIDER, LINDA  
Address: 116 KIRKLAND STREET  
City-St-Zip: PALATKA, FL 32177

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: DAVID HENDERSON

D

04/27/2009

Electronic Signature of Signing Officer or Director

Date