

**ANNUAL REPORT 1999**

Secretary of State  
DIVISION OF CORPORATIONS

**DOCUMENT # N9800001553**

1. Corporation Name  
**BIKESENJAVA CYCLING CLUB, INC.**

Principal Place of Business: 1936 HILLVIEW SARASOTA FL 34239  
Mailing Address: 1936 HILLVIEW SARASOTA FL 34239

2. Principal Place of Business: Suite, Apt. #, etc.  
City & State  
Zip Country

3. Date Incorporated or Qualified: 09/17/1999

4. FEI Number: [ ] Applied For [ ] Not Applicable

5. Certificate of Status Desired: [ ] \$8.75 Additional Fee Required

6. Election Campaign Financing: [ ] \$5.00 May Be Added to Fees

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
99 SEP 27 PM 3:39

8. Name and Address of Current Registered Agent: BIKESENJAVA, 1936 HILLVIEW, SARASOTA FL 34239

9. Name and Address of New Registered Agent: [ ]

11. Pursuant to the provisions of Sections 617.0503 and 617.1004, Florida Statutes, the above-named corporation certifies 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 and familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE: [ ]

12. OFFICERS AND DIRECTORS		13. ADDITIONAL OFFICERS TO OFFICERS AND DIRECTORS IN 12	
TITLE: President	[ ] DELETE	11 TITLE	[ ] Change [ ] Addition
NAME: Fletcher Bennett		12 NAME	
STREET ADDRESS: 1936 Hillview St, Sarasota FL 34239		13 STREET ADDRESS	
CITY, ST, ZIP		14 CITY, ST, ZIP	
TITLE: Treasurer	[ ] DELETE	15 TITLE	[ ] Change [ ] Addition
NAME: Sadie Bennett		16 NAME	
STREET ADDRESS: 1936 Hillview St, Sarasota FL 34239		17 STREET ADDRESS	
CITY, ST, ZIP		18 CITY, ST, ZIP	
TITLE: Secretary	[ ] DELETE	19 TITLE	[ ] Change [ ] Addition
NAME: Sheldon Boyason		20 NAME	
STREET ADDRESS: 1936 Hillview St, Sarasota FL 34239		21 STREET ADDRESS	
CITY, ST, ZIP		22 CITY, ST, ZIP	
TITLE: [ ]	[ ] DELETE	23 TITLE	[ ] Change [ ] Addition
NAME: [ ]		24 NAME	
STREET ADDRESS: [ ]		25 STREET ADDRESS	
CITY, ST, ZIP		26 CITY, ST, ZIP	
TITLE: [ ]	[ ] DELETE	27 TITLE	[ ] Change [ ] Addition
NAME: [ ]		28 NAME	
STREET ADDRESS: [ ]		29 STREET ADDRESS	
CITY, ST, ZIP		30 CITY, ST, ZIP	

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(2)(b), Florida Statutes. I further certify that the information furnished on this annual report of incorporation or 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 officer or director responsible for furnishing the report as required by Chapter 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or in an Additions block of address, with all other the officers.

SIGNATURE: [Signature] **6/14/99** 99-366-7102