2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 26, 2006
Secretary of State

DOCUMENT# N98000001553

Entity Name: BIKESENJAVA CYCLING CLUB, INC.

Current Principal Place of Business:

1936 HILLVIEW
SARASOTA, FL 34239

New Principal Place of Business:

3898 SOUTH OSPREY AVE.
SARASOTA, FL 34239

Current Mailing Address:

1936 HILLVIEW
SARASOTA, FL 34239

New Mailing Address:

3898 SOUTH OSPREY AVE.
SARASOTA, FL 34239

FEI Number: **FEI Number Applied For ( )** **FEI Number Not Applicable (X)** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

BIKESENJAVA
1936 HILLVIEW
SARASOTA, FL 34239 US

Name and Address of New Registered Agent:

BIKESENJAVA
3898 SOUTH OSPREY AVE.
SARASOTA, FL 34239 US

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: TONY MCEACHERN 04/26/2006
Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: DP ( ) Delete
Name: BENNETT, FLETCHER
Address: 1936 HILLVIEW
City-St-Zip: SARASOTA, FL 34239

Title: DT ( ) Delete
Name: BENNETT, JODY
Address: 1936 HILLVIEW ST
City-St-Zip: SARASOTA, FL 34239

Title: DS (X) Delete
Name: MCEACHERN, TONY
Address: 1936 HILLVIEW
City-St-Zip: SARASOTA, FL 34239

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRES (X) Change ( ) Addition
Name: MCEACHERN, TONY
Address: 3898 SOUTH OSPREY AVE
City-St-Zip: SARASOTA, FL 34239

Title: VP (X) Change ( ) Addition
Name: HOSKINSON, BRIAN
Address: 3898 SOUTH OSPREY AVE.
City-St-Zip: SARASOTA, FL 34239

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

I hereby certify that the information supplied with this filing does not qualify for the 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: TONY MCEACHERN PRES 04/26/2006
Electronic Signature of Signing Officer or Director Date