

# 2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

**FILED**  
**Feb 24, 2004 8:00 am**  
**Secretary of State**

02-24-2004 90019 029 \*\*\*\*61.25

**DOCUMENT # N99000002833**

1. Entity Name

PARK TO PARK BIKE PATH COMMITTEE, INC.



Principal Place of Business

701 RIVERSIDE DRIVE  
YANKEETOWN FL 34498

Mailing Address

PO BOX 161  
YANKEETOWN FL 34498

**94019622**



MOORE CR2E037 (11/03)

2. Principal Place of Business

5701 Riverside Drive

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

59-3630778

Applied For  
Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

6. Name and Address of Current Registered Agent

WINTERS, ELISE K  
133 N. FT. HARRISON AVENUE  
CLEARWATER FL 33755

7. Name and Address of New Registered Agent

Name

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

City

**FL**

Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW: FEE IS \$61.25**  
**Due By May 1, 2004**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

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

**Make Check Payable to**  
**Florida Department of State**

10. OFFICERS AND DIRECTORS

TITLE ☐ Delete  
NAME SPETZ, GLEN  
STREET ADDRESS 5701 RIVERSIDE DRIVE  
CITY-ST-ZIP YANKEETOWN FL 34498

TITLE ☐ Delete  
NAME MOORE, MARK  
STREET ADDRESS PO BOX 9  
CITY-ST-ZIP YANKEETOWN FL 34498

TITLE ☐ Delete  
NAME CLARY, DAWN M  
STREET ADDRESS PO BOX 248  
CITY-ST-ZIP YANKEETOWN FL 34498

TITLE ☐ Delete  
NAME KELLMAN, DICK  
STREET ADDRESS 114 ALLEN AVE  
CITY-ST-ZIP INGLIS FL 34449

TITLE ☐ Delete  
NAME PHARES, RAY  
STREET ADDRESS 14 HICHORY AVE.  
CITY-ST-ZIP YANKEETOWN FL 34498

TITLE ☐ Delete  
NAME COHAN, LARRY  
STREET ADDRESS 5107 RIVERSIDE DR  
CITY-ST-ZIP YANKEETOWN FL 34449

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE ☐ Change ☒ Addition  
NAME P & S & D  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS 14 Hickory Ave.  
CITY-ST-ZIP

TITLE ☐ Change ☒ Addition  
NAME T & D  
STREET ADDRESS  
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

**SIGNATURE:**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

15 Feb '04

Date

352-447-4370

Daytime Phone #