

**2003 FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
Mar 17, 2003 8:00 am
Secretary of State

03-17-2003 90677 013 ***150.00

DOCUMENT # P02000018944

1. Entity Name
BACCHETTA BICYCLES, INC.



Principal Place of Business
**251 6TH AVE N
TIERRA VERDE FL 33715**

Mailing Address
**251 6TH AVE N
TIERRA VERDE FL 33715**

2. Principal Place of Business

201A Travelers Way N

3. Mailing Address

201A Travelers Way N

Suite, Apt. #, etc.

St. Petersburg

Suite, Apt. #, etc.

St. Petersburg FL

City & State
St. Petersburg, FL

City & State
St. Petersburg FL

Zip
33710

Country
USA

Zip
33710

Country
USA

4. FEI Number
01-0599559

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75** Additional
Fee Required

6. Name and Address of Current Registered Agent

**SWANSON, MARK E
251 6TH AVE NORTH
TIERRA VERDE FL 33715**

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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2003 Fee will be \$550.00
Make Check Payable to Florida Department of State**

9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00** May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE **P** ☐ Delete
NAME **COLLITON, MARK**
STREET ADDRESS **251 6TH AV N**
CITY-ST-ZIP **TIERRA VERDE FL 33715**

TITLE **V** ☐ Delete
NAME **SCHLITTER, JOHN**
STREET ADDRESS **900 MAIN STREET**
CITY-ST-ZIP **HAYS KS 67601**

TITLE **V** ☐ Delete
NAME **SWANSON, MARK E**
STREET ADDRESS **251 6TH AV NORTH**
CITY-ST-ZIP **TIERRA VERDE FL 33715**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

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

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

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TITLE ☐ Change ☐ Addition
NAME
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 607, 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:

Mark E Swanson
SIGNATURE AND TYPED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Mark Swanson
03/07/03
727-385-7360

CR2E034 (10/02)