

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000133540

Entity Name: VILLAGE BIKES, INC.

FILED
Apr 30, 2006
Secretary of State

Current Principal Place of Business:

1427 PINE BAY DRIVE
SARASOTA, FL 34231

New Principal Place of Business:

6279 LAKE OSPREY DR
SARASOTA, FL 34240

Current Mailing Address:

1427 PINE BAY DRIVE
SARASOTA, FL 34231

New Mailing Address:

FEI Number: 32-0098578

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DOOLEY, WILLIAM A
1432 FIRST STREET
SARASOTA, FL 34236 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: LEVINS, W EDWARD
Address: 1427 PINE BAY DRIVE
City-St-Zip: SARASOTA, FL 34231

Title: D () Delete
Name: LEVINS, KATHLEEN M
Address: 1427 PINE BAY DRIVE
City-St-Zip: SARASOTA, FL 34231

Title: D () Delete
Name: CHRISTOPHER, LEVINS J
Address: 2855 UPPER TANGELO DRIVE
City-St-Zip: SARASOTA, FL 34239

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:

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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: CHRISTOPHER J LEVINS

TRES

04/30/2006

Electronic Signature of Signing Officer or Director

_____ Date