2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 25, 2005
Secretary of State

DOCUMENT# P04000020134

Entity Name: THEE CYCLE SHOP OF CENTRAL FLORIDA INC

Current Principal Place of Business:

4555-A HWY 17-92
HAINES CITY, FL 33844

New Principal Place of Business:

4559 HWY 17-92
HAINES CITY, FL 33844

Current Mailing Address:

1035 W. LAKE CANNON DRIVE
WINTER HAVEN, FL 33881

New Mailing Address:

FEI Number: 20-0632391 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

ANZALONE, ANTHONY J
1035 W. LAKE CANNON DRIVE
WINTER HAVEN, FL 33881 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: P ( ) Delete
Name: ANZALONE, ANTHONY J
Address: 1035 W. LAKE CANNON DRIVE
City-St-Zip: WINTER HAVEN, FL 33881

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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 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 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: ANTHONY ANZALONE P 02/25/2005

Electronic Signature of Signing Officer or Director — Date