

## **2005 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT**

DOCUMENT# P04000062213

Entity Name: CYCLE IMAGE & ACCESSORIES, INC.

**FILED**  
**Dec 07, 2005**  
**Secretary of State**

### **Current Principal Place of Business:**

10263 BEACH BLVD  
SUITE A  
JACKSONVILLE, FL 32246 US

### **New Principal Place of Business:**

### **Current Mailing Address:**

955 CHURCHHILL LANE  
ST AUGUSTINE, FL 32092 US

### **New Mailing Address:**

5202 FREEMONT STREET  
JACKSONVILLE, FL 32210 US

FEI Number: 34-1989534

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

### **Name and Address of Current Registered Agent:**

NETTLES, STACY  
10263 BEACH BLVD.  
SUITE A  
JACKSONVILLE, FL 32246 US

### **Name and Address of New Registered Agent:**

BARNETT, CHRISTOPHER S  
10263 BEACH BLVD.  
SUITE A  
JACKSONVILLE, FL 32246 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: CHRISTOPHER BARNETT

12/07/2005

Electronic Signature of Registered Agent

Date

### **OFFICERS AND DIRECTORS:**

Title: P ( ) Delete  
Name: NETTLES, STACY M  
Address: 10263 BEACH BLVD, SUITE A  
City-St-Zip: JACKSONVILLE, FL 32246 US

Title: VP (X) Delete  
Name: NETTLES, LARRY H JR.  
Address: 10263 BEACH BLVD, SUITE A  
City-St-Zip: JACKSONVILLE, FL 32246 US

### **ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: P (X) Change ( ) Addition  
Name: BARNETT, CHRISTOPHER S  
Address: 10263 BEACH BLVD, SUITE A  
City-St-Zip: JACKSONVILLE, FL 32246 US

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: CHRISTOPHER BARNETT

P

12/07/2005

Electronic Signature of Signing Officer or Director

Date