2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000022910

City-St-Zip:

WESTON, FL 33326

Entity Name: WESTON FLYERS CYCLING CLUB, INC.

FILED May 15, 2009 Secretary of State

Current F	Principal Plac	e of Business:	New Principal Place of	New Principal Place of Business:	
	OMMERCE PA I, FL 33326	ARKWAY SUITE 202	1840 MAIN STREET SUITE 202 WESTON, FL 33326		
Current I	Mailing Addre	ss:	New Mailing Address:	New Mailing Address:	
	OMMERCE PA I, FL 33326	ARKWAY SUITE 202	1840 MAIN STREET SUITE 202 WESTON, FL 33326		
FEI Numbe	r: 20-4351151	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name an	d Address of	Current Registered Agent:	Name and Address of N	Name and Address of New Registered Agent:	
2300 N C	ELD, ROBERT OMMERCE PA N, FL 33326	ARKWAY SUITE 202 US			
	e named entity te of Florida.	submits this statement for the	purpose of changing its registered o	office or registered agent, or both,	
SIGNATL	JRE:				
	Electro	nic Signature of Registered Ag	ent	Date	
		93(2)(b), F.S., the corporation did nongerous fund the first Fund Contribution (ot receive the prior notice.		
OFFICER	RS AND DIREC	CTORS:	ADDITIONS/CHANGES	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address:	ROTHFIELD, I) Delete ROBERT E MD COMMERCE PARKWAY	Title: (Name: Address:) Change ()Addition	

City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify 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: ROBERT ROTHFIELD PRES 05/15/2009