

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P93000068989

FILED  
Aug 10, 2005  
Secretary of State

Entity Name: BIKE AMERICA AT PALM COAST, INC.

**Current Principal Place of Business:**

3936 A1A SOUTH  
ST AUGUSTINE, FL 32080 US

**New Principal Place of Business:**

**Current Mailing Address:**

3936 A1A SOUTH  
ST AUGUSTINE, FL 32080 US

**New Mailing Address:**

FEI Number: 59-3209185

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

BRANT MOORE SAPP MACDONALD & WELLS P.A.  
50 NORTH LAURA ST.  
SUITE 3100  
JACKSONVILLE, FL 32202 US

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

CHRISTOPHER G. SPRINGHORN  
2120 US 1 SOUTH  
SUITE 111  
ST AUGUSTINE, FL 32086 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 G. SPRINGHORN

08/10/2005

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: D ( ) Delete  
Name: KALLIO, DREW P  
Address: 3 SUGAR MILL LANE SOUTH  
City-St-Zip: FLAGLER BEACH, FL 32136

Title: D ( ) Delete  
Name: KALLIO, MARY L  
Address: 3 SUGAR MILL LANE SOUTH  
City-St-Zip: FLAGLER BEACH, FL 32136

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

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 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: DREW P KALLIO

D

08/10/2005

Electronic Signature of Signing Officer or Director

Date