

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Jul 16, 2002 8:00 am
Secretary of State

07-16-2002 90373 027 ***150.00

DOCUMENT # P96000045270

1. Entity Name
SARASOTA CYCLE WORKS, INC.

Principal Place of Business

**1529 CATTLEMEN ROAD
BLDG 2 UNIT 2
SARASOTA FL 34232
US**

Mailing Address

**1529 CATTLEMEN ROAD
BLDG 2 UNIT 2
SARASOTA FL 34232
US**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number **65-0673589**

Applied For

Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**SCHERER, SCOTT A
4701 ATLANTIC AVE
SARASOTA FL 34233**

Name

Street Address (P.O. Box Number is Not Acceptable)

4701 ATLANTIC AVE.

City

FL

Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) ☐

**FILE NOW!!! FEE IS \$550.00
After September 13, 2002 Fee will be \$750.00
Make Check Payable to Department of State**

10. Election Campaign Financing Trust Fund Contribution. ☐ **\$5.00 May Be Added to Fees**

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **DP** ☐ Delete
NAME **SCHERER, SCOTT**
STREET ADDRESS **4701 ATLANTIC AVE**
CITY-ST-ZIP **SARASOTA FL 34233**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE **DST** ☐ Delete
NAME **SCHERER, RENEE M**
STREET ADDRESS **4701 ATLANTIC AVE**
CITY-ST-ZIP **SARASOTA FL 34233**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
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STREET ADDRESS
CITY-ST-ZIP

13. I hereby certify that the information supplied with this filing does not qualify 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 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 in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Scott A. Scherer *Renee M. Scherer* 7/8/02 941-927 1066

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E034 (4/02)

Attachment
SARASOTA CYCLE WORKS, INC.
1529 CATTLEMEN RD. BLDG. #3
SARASOTA, FL. 34232
941-371-BIKE (2453)

970424
P96000045270

To: Florida Department of State
Division of Corporations
PO Box 6327
Tallahassee, Fl. 32314

Re: Filing of the 2002 Uniform Business Report

To Whom It May Concern:

Enclosed is the 2002 filing report for our business. I have enclosed a check in the amount of \$150.00. We never received the first notice of renewal in the mail from you. We also have had similar situations with the mail here in the past. We don't know if someone is taking mail from the boxes out on the road or it just never gets delivered. I hope that this explanation is acceptable to you. I am going to look into a Post Office box for our business mail so that this does not happen again. I do appreciate your understanding in this matter.

Sincerely,

Renee M. Scherer

Renee M. Scherer
Sarasota Cycle Works, Inc.