


**2005 FOR PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**Mar 26, 2005 08:00 AM**  
**Secretary of State**

<b>DOCUMENT # P96000064882</b> 1. Entity Name REVOLUTION BICYCLES, INC.	
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Principal Place of Business 3125 4TH STREET N SAINT PETERSBURG, FL 33704 US	Mailing Address 3125 4TH STREET N SAINT PETERSBURG, FL 33704 US
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**DO NOT WRITE IN THIS SPACE**



02162005 No Chg-P CR2E034 (10/03)

4. FEI Number 59-3391889	Applied For Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75</b> Additional Fee Required
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6. Name and Address of Current Registered Agent

ADDLER, WILLIAM G  
430 APPIAN WAY NE  
ST. PETERSBURG, FL 33704

**DO NOT WRITE  
IN THIS SPACE**

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 William Addler DATE 3/23/05  
Signature, typed or printed name of registered agent and file if applicable. (NOTE: Registered Agent signature required when reappointing)

**FILE NOW!!! FEE IS \$150.00**  
**After May 1, 2005 Fee will be \$550.00**

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

U000000277142  
03/26/05-80017-023 150.00

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY - ST - ZIP	P ADDLER, WILLIAM G 430 APPIAN WAY N.E. SAINT PETERSBURG, FL 33704
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VPS ADDLER, CATHERINE H 430 APPIAN WAY N.E. SAINT PETERSBURG, FL 33704
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
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TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	

**DO NOT WRITE  
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: William Addler DATE 3/23/05  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

727-322-2453