

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P98000107979

1. Entity Name

CYCLE SPORTS, INC.

FILED
May 18, 2000 8:00 am
Secretary of State

05-18-2000 90361 001 ***150.00

Principal Place of Business

Mailing Address

1702 W. UNIVERSITY AVE.
GAINESVILLE FL 32603

1702 W. UNIVERSITY AVE.
GAINESVILLE FL 32603-1845

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

59-3548460

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

WILDER, ELLEN F
3545-1 ST. JOHNS BLUFF #304
JACKSONVILLE FL 32224

Name
Wilder, Ellen F.

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

1515 N.W. 18th St

City
Gainesville

FL

Zip Code
32605

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.

SIGNATURE Ellen F. Wilder

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

Ellen F. Wilder

(NOTE: Registered Agent signature required when reinstating)

3/19/00

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 \$150.00
After MAY 1, 2000 Fee will be \$550.00
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 PD ☐ Delete
NAME WILDER, ELLEN F
STREET ADDRESS 3545-1 ST. JOHNS BLUFF #304
CITY-ST-ZIP JACKSONVILLE FL 32224

TITLE PD ☒ Change ☐ Addition
NAME Wilder, Ellen F.
STREET ADDRESS 1515 N.W. 18th St.
CITY-ST-ZIP Gainesville, FL 32605

TITLE VPD ☐ Delete
NAME WILDER, WILLIAM H
STREET ADDRESS 3545-1 ST. JOHNS BLUFF #304
CITY-ST-ZIP JACKSONVILLE FL 32224

TITLE VPD ☒ Change ☐ Addition
NAME Wilder, William H.
STREET ADDRESS 1515 N.W. 18th St.
CITY-ST-ZIP Gainesville, FL 32605

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

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

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
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CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
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:

Ellen F. Wilder Ellen F. Wilder

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/30/00

Date

3523766729

Daytime Phone #

CR2E034 (9/99)