2020 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 720650

Entity Name: ST. PETERSBURG BICYCLE CLUB, INCORPORATED

FILED
Jan 19, 2020
Secretary of State
7616496007CC

Current Principal Place of Business:

901 34TH AVE N # 76023

ST PETERSBURG, FL 33734-8041

Current Mailing Address:

PO BOX 76023

ST PETERSBURG, FL 33734-6023 US

FEI Number: 59-2454681 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

BODE, DANIEL JR. 1201 GANDY BLVD N # 22664 ST PETERSBURG, FL 33742-8094 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: DANIEL BODE, JR. 01/19/2020

Electronic Signature of Registered Agent Date

Officer/Director Detail:

Title TREASURER Title SECRETARY

Name BODE, DANIEL JR. Name WOODCOCK, KRIS

Address 1201 GANDY BLVD N # 22664 Address 226 5TH AVE N

APT 1402

City-State-Zip: ST PETERSBURG FL 33742-8094 City-State-Zip: ST PETERSBURG FL 33701-2961

City-State-Zip: ST PETERSBURG FL 33713-5215 City-State-Zip: INDIAN ROCKS BEACH FL 33785-

2922

Title VP

Name SMITH, FRANK Title COMMUNICATIONS

Address 41 16TH STREET S. Name ORDONEZ, MANUEL

City-State-Zip: ST. PETERSBURG FL 33705-1600 Address 936 S HOWARD AVE UNIT 305

City-State-Zip: TAMPA FL 33606-2492

Title DIRECTOR

Name FRANCHETTI, MARK Title DIRECTOR

Address 2597 54TH AVE S Name JOFFE, MARGARET A

City-State-Zip: ST PETERSBURG FL 33712-4705 Address 107 11TH AVE N

City-State-Zip: ST PETERSBURG FL 33701-1821

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I hereby 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 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: DANIEL BODE, JR. TREASURER 01/19/2020

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued:

Title DIRECTOR

Name MIDDLETON, JACQUELINE C
Address 131 TENNESSEE AVE NE

City-State-Zip: ST PETERSBURG FL 33702-7657