2018 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N97000005450

Entity Name: FLORIDA BICYCLE ASSOCIATION, INC.

Current Principal Place of Business:

250 STRATHMORE AVENUE OLDSMAR, FL 34677

Current Mailing Address:

PO BOX 2452 OLDSMAR, FL 34677 US

FEI Number: 59-3469746

Name and Address of Current Registered Agent:

AFONSO, REBECCA JO 250 STRATHMORE AVENUE OLDSMAR, FL 34677 US Certificate of Status Desired: No

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 | REBECCA AFONSO | | | 02/25/2018 | |
|---------------------------|--|-----------------|---------------------------|------------|--|
| | Electronic Signature of Registered Agent | | | Date | |
| Officer/Director Detail : | | | | | |
| Title | DIRECTOR | Title | VP | | |
| Name | OLMSTEAD, J. STEELE ESQ. | Name | EGBERTS, JOHN | | |
| Address | 14517 N 18TH STREET | Address | PO BOX 118208 | | |
| City-State-Zip: | TAMPA FL 33613 | City-State-Zip: | GAINESVILLE FL 32611 | | |
| Title | SECRETARY | Title | TREASURER | | |
| Name | DODSON, JIM | Name | LEDEW, CHRIS | | |
| Address | 310 WILDWOOD WAY | Address | 11867 NARROW OAK LANE S | | |
| City-State-Zip: | CLEARWATER FL 33756 | City-State-Zip: | JACKSONVILLE FL 32223 | | |
| Title | EXECUTIVE DIRECTOR | Title | PRESIDENT | | |
| Name | AFONSO, REBECCA JO | Name | HUFF, PATRICIA | | |
| Address | 250 STRATHMORE AVENUE | Address | 207 N. STORTER | | |
| City-State-Zip: | OLDSMAR FL 34677 | City-State-Zip: | EVERGLADES CITY FL 34139 |) | |
| Title | DIRECTOR | Title | DIRECTOR | | |
| Name | MINGUS, EDWARD | Name | REYNOLDS, COURTNEY | | |
| Address | 3393 MAHOGANY POINTE LOOP | Address | 100 MYRTLE STREET UNIT 10 | 6 | |
| City-State-Zip: | LAKELAND FL 33810 | City-State-Zip: | LONGWOOD FL 32750 | | |
| | | | | | |

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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: REBECCA JO AFONSO

EXECUTIVE DIRECTOR 02/25/2018

Electronic Signature of Signing Officer/Director Detail

FILED Feb 25, 2018 Secretary of State CC3801506658

Officer/Director Detail Continued :

| Title | DIRECTOR |
|-----------------|-----------------------|
| Name | TUCKER, KURTIS |
| Address | 16470 SW 296TH STREET |
| City-State-Zip: | HOMESTEAD FL 33030 |