## 2024 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N97000005450

Entity Name: FLORIDA BICYCLE ASSOCIATION, INC.

**Current Principal Place of Business:** 

149 BLUE STONE CIRCLE WINTER GARDEN. FL 34787

**Current Mailing Address:** 

PO BOX 770688

WINTER GARDEN. FL 34777 US

FEI Number: 59-3469746 Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

WINTER GARDEN FL 34777

MORPHY, KELLY 149 BLUE STONE CIRCLE WINTER GARDEN, FL 34787 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: KELLY MORPHY 02/27/2024

Electronic Signature of Registered Agent

Officer/Director Detail:

Title Title EXECUTIVE DIRECTOR

CERAME, CAITLIN MORPHY, KELLY Name Name 207 W. PLANT ST. Address PO BOX 770688 Address

SUITE 770688

City-State-Zip: City-State-Zip: WINTER GARDEN FL 34787

Title VP, TREASURER Title DIRECTOR

Name REYNOLDS, COURTNEY Name JACOBS, CONROY Address PO BOX 770688 PO BOX 770688 Address

City-State-Zip: WINTER GARDEN FL 34777 City-State-Zip: WINTER GARDEN FL 34777

Title **PRESIDENT** Title **DIRECTOR** Name DRAPER. ERIC Name WOODS, GAIL Address PO BOX 770688 Address PO BOX 770688

WINTER GARDEN FL 34777 City-State-Zip: City-State-Zip: WINTER GARDEN FL 34777

Title DIRECTOR Title DIRECTOR

AVOLA-BROWN, MICHELLE Name Name GARRETT, RICHARD Address PO BOX 770688 Address PO BOX 770688

WINTER GARDEN FL 34777 City-State-Zip: WINTER GARDEN FL 34777 City-State-Zip:

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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.

02/27/2024 SIGNATURE: KELLY MORPHY EXECUTIVE DIRECTOR

Electronic Signature of Signing Officer/Director Detail

Date

**FILED** Feb 27, 2024

**Secretary of State** 

1032810776CC

Date

## Officer/Director Detail Continued:

Title DIRECTOR

Name MCVEIGH, ROGER Address PO BOX 770688

City-State-Zip: WINTER GARDEN FL 34777