# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED**
**May 04, 2008**
**Secretary of State**

DOCUMENT# N01000007193

**Entity Name:** SPACE COAST TRIATHLETES, INC.

**Current Principal Place of Business:**

2498 VILLAGE PARK DR
MELBOURNE, FL 32934

**New Principal Place of Business:**

**Current Mailing Address:**

2498 VILLAGE PARK DR
MELBOURNE, FL 32934

**New Mailing Address:**

**FEI Number: 31-1802795** **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**
**In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.**

**Name and Address of Current Registered Agent:**

MAXWELL, PAM
2498 VILLAGE PARK DR
MELBOURNE, FL 32934 US

**Name and Address of New Registered Agent:**

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: ______________________________

Electronic Signature of Registered Agent — Date

**OFFICERS AND DIRECTORS:**

| | |
|---|---|
| Title: | VP ( ) Delete |
| Name: | COLLUIAS, SUZANNE |
| Address: | 2210 RIVERSIDE AVE |
| City-St-Zip: | INDIALANTIC, FL 32903 |

| | |
|---|---|
| Title: | T ( ) Delete |
| Name: | MAXWELL, PAM |
| Address: | 2498 VILLAGE PARK DR |
| City-St-Zip: | MELBOURNE, FL 32934 |

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

| | |
|---|---|
| Title: | ( ) Change ( ) Addition |
| Name: | |
| Address: | |
| City-St-Zip: | |

| | |
|---|---|
| Title: | ( ) Change ( ) Addition |
| Name: | |
| Address: | |
| City-St-Zip: | |

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: PAM MAXWELL S 05/04/2008

Electronic Signature of Signing Officer or Director — Date