

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N37799

1. Entity Name

GULF COAST TRIATHLON FOUNDATION, INC.

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

01-18-2000 90110 018 ****61.25

Principal Place of Business

Mailing Address

1618 ISABELLA AVE
PANAMA CITY FL 32401
US

P.O. BOX 4055
PANAMA CITY FL 32401-8055



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

9851 S. Thomas Drive

Suite, Apt. #, etc.

213

Suite, Apt. #, etc.

City & State

Panama City Beach

City & State

Zip

32408

Country

Bay

Zip

Country

4. FEI Number

59-2308102

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

BRAMBLETT, SHELLEY A
102 QUEENS CIRCLE
PANAMA CITY FL 32405

Name

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

City

FL

Zip Code

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

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

Shelley A Bramblett, Treasurer
(NOTE: Registered Agent signature required when reinstating)

1/10/00
DATE

FILE NOW:
FEE IS \$61.25

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make Check Payable to
Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE NAME ☐ Delete
P WALBY, DAVID
STREET ADDRESS 469 W. 23RD ST. SUITE 201
CITY-ST-ZIP PANAMA CITY FL

TITLE NAME ☐ Change ☒ Addition
John Daly
STREET ADDRESS 4614 Delwood Park Blvd
CITY-ST-ZIP Panama City Beach, FL

TITLE NAME ☐ Delete
DT BRAMBLETT, SHELLEY A
STREET ADDRESS 102 QUEENS CIRCLE
CITY-ST-ZIP PANAMA CITY FL

TITLE NAME ☐ Change ☒ Addition
D Brian Didier
STREET ADDRESS 636 N. 9th Place
CITY-ST-ZIP Panama City, FL

TITLE NAME ☐ Delete
DS MCTRUSTY, TIM
STREET ADDRESS 114 SAND DOLLAR DR.
CITY-ST-ZIP PANAMA CITY BC

TITLE NAME ☐ Change ☒ Addition
D Carrie Harrison
STREET ADDRESS 3119 Dorothy Avenue
CITY-ST-ZIP Panama City Beach

TITLE NAME ☐ Delete
D BOYD, DAVID
STREET ADDRESS 6700 LETOHATCHEE
CITY-ST-ZIP PANAMA CITY FL

TITLE NAME ☒ Change ☐ Addition
D David Boyd
STREET ADDRESS 805 Mallory Drive
CITY-ST-ZIP Panama City, FL

TITLE NAME ☐ Delete
D SWIGLER, ALAN
STREET ADDRESS 23 HARRISON AVE.
CITY-ST-ZIP PANAMA CITY FL

TITLE NAME ☒ Change ☐ Addition
D Alan Swigler
STREET ADDRESS 719 Beachcomber Drive
CITY-ST-ZIP Lynn Haven, FL

TITLE NAME ☐ Delete
D SIMS, CAROL
STREET ADDRESS 7306 MARKET STREET
CITY-ST-ZIP SOUTHPORT FL

TITLE NAME ☐ Change ☒ Addition
D Jeff Whitton
STREET ADDRESS 565 Harrison Ave
CITY-ST-ZIP Panama City, FL

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Shelley A Bramblett
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/10/00
Date

522-8781
Daytime Phone #

CR2E037 (9/99)