2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N37799

FILED Jaņ 2<u>0, 2</u>005 Secretary of State

Entity Name: GULF COAST TRIATHLON FOUNDATION, INC.

Current Principal Place of Business: New Principal Place of Business:

5108 SKYVIEW DR.

PANAMA CITY, FL 32408 LIS

Current Mailing Address: New Mailing Address:

PO BOX 15456

PANAMA CITY, FL 32406

FEI Number: 59-2308102 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

BRAMBLETT, SHELLEY A 1611 OAK HÓLLOW ROAD

P.O. BOX 15456 CLERMONT, FL 34711 PANAMA CITY, FL 32406 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.

BRAMBLETT, SHELLEY A

SIGNATURE: SHELLEY A. BRAMBLETT 01/20/2005

> Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

(X) Change () Addition () Delete BRAMBLETT, SHELLEY A BRAMBLETT, SHELLEY A Name: Name:

1611 OAK HOLLOW ROAD Address: P.O. BO X15456 Address:

PANAMA CITY, FL 32406 City-St-Zip: CLERMONT, FL 34711 City-St-Zip:

Title: DS () Delete Title: () Change () Addition

MCTRUSTY, TIM Name: Name: Address: 114 SAND DOLLAR DR. Address: City-St-Zip: PANAMA CITY, FL 32408 City-St-Zip:

Title: () Delete Title: () Change () Addition

BOYD, DAVID Name: Name: 805 MALLODY DRIVE Address: Address: City-St-Zip: PANAMA CITY, FL 32401 City-St-Zip:

Title: () Delete Title: () Change () Addition

Name: SWIGLER, ALAN Name: 719 BEACHCOMBER DR Address: Address: City-St-Zip: PANAMA CITY, FL City-St-Zip:

Title: () Delete Title: () Change () Addition

JEFF, WHITTON Name: Name: 565 HARRISON AVE Address: Address: City-St-Zip: PANAMA CITY, FL City-St-Zip:

Title: () Delete Title: () Change () Addition

MATAMOROS, CESAR Name: Name: Address: 1110 CAROLINA AVE. Address: LYNN HAVEN, FL 32444 City-St-Zip: City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: SHELLEY A. BRAMBLETT DT 01/20/2005

Electronic Signature of Signing Officer or Director

Date