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SECRETARY OF STATE  
DIVISION OF CORPORATIONS

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<b>NONPROFIT CORPORATION ANNUAL REPORT 1999</b>				<b>FLORIDA DEPARTMENT OF STATE</b> Katherine Harris Secretary of State DIVISION OF CORPORATIONS	
<b>DOCUMENT # N98000001943</b>					
1. Corporation Name <b>CENTRAL FLORIDA TRIATHLETES, INC.</b>					
Principal Place of Business 838 DESOTO ST CLERMONT FL 34711		Mailing Address 838 DESOTO ST CLERMONT FL 34711			
2. Principal Place of Business 21 Suite, Apt. #, etc. 22 City & State 23 Zip Country		2a. Mailing Address 26 Suite, Apt. #, etc. 27 City & State 28 Zip Country		3. Date Incorporated or Qualified <b>03/30/1998</b> 4. FBI Number <b>59-3517894</b> 5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required 6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees	
9. Name and Address of Current Registered Agent <b>SOMMER, FRED</b> <b>838 DESOTO ST</b> <b>CLERMONT FL 34711</b>			10. Name and Address of New Registered Agent 81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 83 84 City <b>FL</b> 85 Zip Code		
11. Pursuant to the provisions of Sections 617.0502 and 617.1506, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.					
SIGNATURE _____ DATE _____ Signature, typed or printed name of registered agent and file if applicable. (NOTE: Registered Agent signature required when reappointing)					
12. OFFICERS AND DIRECTORS <input type="checkbox"/> DELETE			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition		
TITLE <b>D</b> NAME <b>SOMMER, FRED</b> STREET ADDRESS <b>838 DESOTO ST</b> CITY-ST-ZIP <b>CLERMONT FL 34711</b>			1.1 TITLE <b>P</b> 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP		
TITLE <b>D</b> NAME <b>GARRICK, DAVID JR.</b> STREET ADDRESS <b>15840-134 SR 50</b> CITY-ST-ZIP <b>CLERMONT FL 34711</b>			2.1 TITLE <b>T D</b> 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP		
TITLE <b>D</b> NAME <b>MECKFESSEL, STEVE</b> STREET ADDRESS <b>PO BOX 120809 N/A</b> CITY-ST-ZIP <b>CLERMONT FL 34711</b>			3.1 TITLE <b>B</b> 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP		
TITLE <input type="checkbox"/> DELETE NAME STREET ADDRESS CITY-ST-ZIP			4.1 TITLE <b>D</b> 4.2 NAME 4.3 STREET ADDRESS <b>15840-134 SR 50</b> 4.4 CITY-ST-ZIP <b>CLERMONT, FL 34711</b>		
TITLE <input type="checkbox"/> DELETE NAME STREET ADDRESS CITY-ST-ZIP			5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP		
TITLE <input type="checkbox"/> DELETE NAME STREET ADDRESS CITY-ST-ZIP			6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP		

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: SIGNATURE REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

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AD

**CENTRAL FLORIDA TRIATHLETES, INC.**  
838 Desoto Street  
Clermont, FL 34711

(352) 394-1320

Date: October 29, 1999

**Florida Department of State  
Secretary of State  
Division of Corporations**

Attn: Dissolution

Re: **N98000001943 notice of revocation**

**Gentlemen,**

We received your dissolution form. This was talked about with Kathy in your office in August, 1999. She advised me that contractors were filing all the paperwork and she could not confirm if our information that was requested was posted at that time or not.

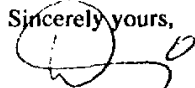
Apparently from your letter it was not posted.

However, I can assure you it was mailed. I have enclosed copies of the corrected form and a copy of our check #10760 dated 4/30/99 paying the fee.

In calling your office today, I was told that our check had been cleared but the paperwork must have been lost. Please make the necessary corrections and advise us that our corporation is still active and legal.

Thanks in advance for your cooperation.

Sincerely yours,



David Garrick Jr.  
Treasurer  
cc: file