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.	

**EVENT ORGANIZER** 

SIGNATURE: SHELDA MOLL

Electronic Signature of Signing Officer/Director Detail

# DOCUMENT# N09000010255 Entity Name: KIDS TRIATHLON, INC.

2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

### **Current Principal Place of Business:**

8762 PERIMETER PARK BLVD JACKSONVILLE, FL 32216

### **Current Mailing Address:**

8762 PERIMETER PARK BLVD JACKSONVILLE, FL 32216 US

## FEI Number: 27-1125911

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

FOUNTAIN, DONALD A 8762 PERIMETER P JACKSONVILLE, FL

The above named entit

SIGNATURE	DONALD A FOUNTAIN			01/10/2017	
	Electronic Signature of Registered Agent			Date	
Officer/Director Detail :					
Title	EXEC	Title	EVENT ORGANIZER		
Name	GILDERSLEEVE, MANDY	Name	MOLL, SHELDA		
Address	6415 WESTGATE DRIVE	Address	2317 BLANDING BLVD SUITE 101		
City-State-Zip:	DALLAS TX 75254	City-State-Zip:	JACKSONVILLE FL 32210		

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Certificate of Status Desired: No

01/10/2017 Date