

FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

FILED
Apr 28 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # 323847 (4)

1. Corporation Name
MARATHON FLIGHT SCHOOL, INC.



Principal Place of Business 3010 W PATRICK STREET KISSIMMEE FL 34741	Mailing Address 3010 W PATRICK STREET KISSIMMEE FL 34741-5970
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2. Principal Place of Business	2a. Mailing Address	3. Date Incorporated or Qualified 12/01/1967	3a. Date of Last Report 04/23/1996
21. Suite, Apt. #, etc.	26. Suite, Apt. #, etc.	4. FEI Number 59-1201848	<input checked="" type="checkbox"/> Applied For <input type="checkbox"/> Not Applicable
22. City & State	27. City & State	5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
23. Zip	28. Zip	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
24. Country	29. Country	8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent

~~PRETSCH, SHIRLEY
 1690 STARFISH
 KISSIMMEE FL 34744~~

Delete

10. Name and Address of New Registered Agent

61 Name **Pretsch, Ernest**

62 Street Address (P.O. Box Number is Not Acceptable)
1517 Colony Ave

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64 City **Kissimmee** FL 65 Zip Code **34744**

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, 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 607.0505, Florida Statutes.

SIGNATURE Ernest Pretsch *Ernest Pretsch* DATE **4/18/97**

Signature, typed or printed name of registered agent and fee if applicable. (NOTE: Registered Agent signature required when reissuing)

12. OFFICERS AND DIRECTORS

TITLE	PD	<input type="checkbox"/> DELETE
NAME	PRETSCH, ERNEST	
STREET ADDRESS	1690 STARFISH ST	
CITY-ST-ZIP	KISSIMMEE FL	
TITLE	STD	<input checked="" type="checkbox"/> DELETE
NAME	PRETSCH, SHIRLEY	
STREET ADDRESS	1690 STARFISH ST.	
CITY-ST-ZIP	KISSIMMEE FL	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	PD	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	Pretsch, Ernest	
1.3 STREET ADDRESS	1517 Colony Ave.	
1.4 CITY-ST-ZIP	Kissimmee, FL 34744	
2.1 TITLE	VP/D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
2.2 NAME	Sheets, John	
2.3 STREET ADDRESS	2117 Cecile St.	
2.4 CITY-ST-ZIP	Kissimmee, FL 34741	
3.1 TITLE	Secy/D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
3.2 NAME	Birks, Jeanne Pretsch	
3.3 STREET ADDRESS	3374 Forest Glen Dr.	
3.4 CITY-ST-ZIP	Denton, TX 76205	
4.1 TITLE	Treez.	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
4.2 NAME	Poplar, Tallulah	
4.3 STREET ADDRESS	4409 Suntan Dr.	
4.4 CITY-ST-ZIP	Kissimmee, FL 34746-2768	
5.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY-ST-ZIP		
6.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME		
6.3 STREET ADDRESS		
6.4 CITY-ST-ZIP		

14. I do 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 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 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: *Ernest Pretsch* Ernest Pretsch 418/97 (401) 847-6112

CR2E034 (9/96)