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NONPROFIT CORPORATION
 ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
 Secretary of State
 DIVISION OF CORPORATIONS

DOCUMENT # 724054

1. Corporation Name

MARIETTA MANAGEMENT CO., INC.

Principal Place of Business

3421 S PENINSULA DR
 DAYTONA BEACH SHORES FL. 32118-6345
 US

Mailing Address

3421 S PENINSULA DR
 DAYTONA BEACH SHORES FL. 32118-6345
 US



2. Principal Place of Business

2a. Mailing Address

3. Date Incorporated or Qualified

08/08/1972

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

4. FEI Number

59-1631550

Applied For

Not Applicable

23 City & State

27 City & State

5. Certificate of Status Desired

\$8.75 Additional Fee Required

24 Zip

25 Country

28 Zip

30 Country

6. Election Campaign Financing Trust Fund Contribution

\$5.00 May Be Added to Fees

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

BROOKHART, BARBARA
 3421 S PENINSULA DRIVE
 DAYTONA BEACH FL 32018

81 Name

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

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, 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 617.0503, Florida Statutes.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE PD DELETE
 NAME FULLERTON, ROBERT
 STREET ADDRESS 100 SEAWAY AVE
 CITY-ST-ZIP DAYTONA BEACH FL 32118

1.1 TITLE PD Change Addition
 1.2 NAME Joan Loucks
 1.3 STREET ADDRESS 102 Seaway
 1.4 CITY-ST-ZIP Daytona Beach FL 32118

TITLE SD DELETE
 NAME BROOKHART, BARBARA
 STREET ADDRESS 3421 S PENINSULA DR
 CITY-ST-ZIP DAYTONA BEACH, FL 00000

2.1 TITLE Change Addition
 2.2 NAME
 2.3 STREET ADDRESS
 2.4 CITY-ST-ZIP

TITLE VD DELETE
 NAME LOUCKS, JOAN
 STREET ADDRESS 102 SEAWAY AVE
 CITY-ST-ZIP DAYTONA BEACH FL

3.1 TITLE VD Change Addition
 3.2 NAME Curtis Leonard
 3.3 STREET ADDRESS 3429 S. Peninsula Dr.
 3.4 CITY-ST-ZIP Daytona Bch. FL 32118

TITLE TD DELETE
 NAME LEONARD, JACKI
 STREET ADDRESS 3429 S PENINSULA DR
 CITY-ST-ZIP DAYTONA BEACH FL 32118

4.1 TITLE TD Change Addition
 4.2 NAME Michael Loucks
 4.3 STREET ADDRESS 102 Seaway
 4.4 CITY-ST-ZIP Daytona Beach FL 32118

TITLE DELETE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

5.1 TITLE Assistant Treasurer Change Addition
 5.2 NAME Richard Petrisko
 5.3 STREET ADDRESS 95 Helen St.
 5.4 CITY-ST-ZIP Binghamton, NY 13905

TITLE DELETE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

6.1 TITLE Change Addition
 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: *Barbara Brookhart* SIGNATURE REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

904-762-8840

CR2E037 (1/198)