

# 2004 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT # 736696

1. Entity Name  
MARATHON JAYCEES, INC.



Principal Place of Business  
705-33RD STREET, GULF  
P.O. BOX 500662  
MARATHON, FL 33050-7662

Mailing Address  
5800 OVERSEAS HIGHWAY  
SUITE 40  
MARATHON, FL 33050 US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

11122004 REIN-NP

CR2E099 (6/04)

4. FEI Number  
59-2751200

Applied For  
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional  
Fee Required -

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

GREENMAN, FRANKLIN D.  
5800 OVERSEAS HWY SUITE 40  
MARATHON, FL 33050

Name

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

5800 OVERSEAS HWY SUITE 40  
MARATHON, FL 33050

City

FL

Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12/10/04

FILE NOW!!! FEE IS \$61.25  
After January 1, 2005, Fee will be \$122.50

In accordance with s. 607.193(2)(b), F.S., the  
corporation did not receive the prior notice.

Make check payable to  
Florida Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE PD  
NAME WAGNERR, JOANN  
STREET ADDRESS 725 A 79TH STREET  
CITY-ST-ZIP MARATHON, FL 33050 ☒ Delete

TITLE President  
NAME Gonzalez, Luis  
STREET ADDRESS P.O. Box 507140  
CITY-ST-ZIP Marathon, FL 33050 ☐ Change ☒ Addition

TITLE XD  
NAME DANIELS, BILL  
STREET ADDRESS 787 30TH STREET OCEAN  
CITY-ST-ZIP MARATHON, FL 33050 ☐ Delete

TITLE  
NAME  
STREET ADDRESS 611 101st Street Ocean  
CITY-ST-ZIP ☒ Change ☐ Addition

TITLE SD  
NAME KING, KELLY M  
STREET ADDRESS PO BOX 523404  
CITY-ST-ZIP MARATHON SHORES, FL 33052 ☒ Delete

TITLE Vice President  
NAME Brake, Joe  
STREET ADDRESS P.O. Box 501849  
CITY-ST-ZIP Marathon, FL 33050 ☐ Change ☒ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

TITLE Secretary-Treasurer  
NAME Player, Sherry  
STREET ADDRESS P.O. Box 501792  
CITY-ST-ZIP Marathon, FL 33050 ☐ Change ☒ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

TITLE Secretary  
NAME Joy Barnhart  
STREET ADDRESS P.O. Box 500662  
CITY-ST-ZIP MARATHON, FL 33050 ☐ Change ☒ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ Addition

12. 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 report or supplemental 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 10 or Block 11 if changed; or on an attachment with an address, with all other like empowered.

SIGNATURE:

Sherry Player

11-12-04

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #