

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Sep 12, 2002 8:00 am
Secretary of State

09-12-2002 90067 021 ****61.25

DOCUMENT # 736768

1. Entity Name

THE MARATHON COMMUNITY THEATRE INC.

Principal Place of Business

5101 OVERSEAS HWY
 MARATHON FL 33050
 US

Mailing Address

P O BOX 500124
 MARATHON FL 33050

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number **59-1692300**

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

ALBRITTON, LAWRENCE E.
2975 OVERSEAS HWY
MARATHON FL 33050

Name

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

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

After September 13, 2002,
min. will be \$236.25.

9. Election Campaign Financing
 Trust Fund Contribution: ☐

\$5.00 May Be
Added to Fees

Make Check Payable to
Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE
 NAME **D IRWIN, RITA** ☐ Delete
 STREET ADDRESS **307 FERRIERE ST**
 CITY-ST-ZIP **MARATHON FL 33050**

TITLE
 NAME **VP/D George Woodward** ☐ Change ☒ Addition
 STREET ADDRESS **965 Ocotillo Lane**
 CITY-ST-ZIP **Marathon FL 33050**

TITLE
 NAME **PD MADDEN, JANE DISKO** ☒ Delete
 STREET ADDRESS **100TH ST OCEAN**
 CITY-ST-ZIP **MARATHON FL 33050**

TITLE
 NAME **T/D Carolyn J. Black** ☐ Change ☒ Addition
 STREET ADDRESS **3680 Treasure Is. St.**
 CITY-ST-ZIP **Big Pine Key, FL 33043**

TITLE
 NAME **TD DIMARCO, SUE** ☒ Delete
 STREET ADDRESS **839 COPA D'ORO**
 CITY-ST-ZIP **MARATHON FL 33050**

TITLE
 NAME **VP/D Marilyn Tempest** ☐ Change ☒ Addition
 STREET ADDRESS **900 Corte Del Sol**
 CITY-ST-ZIP **Marathon, FL 33050**

TITLE
 NAME **EVPD PURVIS, ANN HART** ☒ Delete
 STREET ADDRESS **119 TONER LANE**
 CITY-ST-ZIP **ISLAMORADA FL 33036**

TITLE
 NAME **P/D Rita Irwin** ☒ Change ☐ Addition
 STREET ADDRESS **307 Ferriere St.**
 CITY-ST-ZIP **Marathon, FL 33050**

TITLE
 NAME **VPPD ESTOLO, BERT** ☒ Delete
 STREET ADDRESS **116 CALLE ENSUENO**
 CITY-ST-ZIP **MARATHON FL 33050**

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

TITLE
 NAME **S MCEWEN, CLAUDIA** ☐ Delete
 STREET ADDRESS **PO BOX 501136**
 CITY-ST-ZIP **MARATHON FL 33050**

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

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 another like empowered.

SIGNATURE: SIGNATURE REQUIRED

305-743-0408

CP2E037 (4/02)