

# **2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 736768

**FILED**  
**Mar 08, 2011**  
**Secretary of State**

**Entity Name:** THE MARATHON COMMUNITY THEATRE INC.

**Current Principal Place of Business:**

5101 OVERSEAS HWY  
MARATHON, FL 33050 US

**New Principal Place of Business:**

**Current Mailing Address:**

P O BOX 500124  
MARATHON, FL 33050

**New Mailing Address:**

5101 OVERSEAS HWY  
MARATHON, FL 33050 US

**FEI Number:** 59-1692300

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

GEOTIS, LORETTA S  
5101 OVERSEAS HWY  
MARATHON, FL 33050 US

**Name and Address of New Registered Agent:**

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.

**SIGNATURE:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: P  
Name: MEREL, ALICIA  
Address: PO BOX 500124  
City-St-Zip: MARATHON, FL 33050

Title: VP  
Name: TEMPEST, MARILYN  
Address: PO BOX 500124  
City-St-Zip: MARATHON, FL 33050

Title: T  
Name: HUNDHAMMER, FRED  
Address: PO BOX 500124  
City-St-Zip: MARATHON, FL 33050

Title: S  
Name: RICKETT, SYLVIA  
Address: P.O. BOX 500124  
City-St-Zip: MARATHON, FL 33050

Title: VP  
Name: BURNETT, GAIL  
Address: PO BOX 500124  
City-St-Zip: MARATHON, FL 33050

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.

**SIGNATURE:** LORETTA GEOTIS

ED

03/08/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date