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NONPROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT #

751082

(9)

MARATHON POWER SQUADRON, INC.

FILED

Feb 18 1997 8:00am

Secretary of State

Principal Place of Business	Mailing Address	L CORRECT MEDIC WITHOUT START WEIGHT ARTIN THE MENTAL WINNESS
P.O. BOX 938	P.O. BOX 938	

	00000			ON FL 33050-2235				L				
			,	J. 1 1 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2				3.	Date incorporated or Qualified 02/18/1980	3a. Date 0	14/199	port 6
2.	Principal Place of Busin	2a. Mailing Address					4.	FEI Number	- I	Ap	plied For	
21		26						59-6152243			No	Applicable
_	Suite, Apt. #, etc. Suite, Apt. #, etc.								Certificate of Status Desired	_ \$	8.75 A	dditional
22 27									Continuate of Citatos Positog		Fee Re	quired
	City & State	F,						6.	Election Campaign Financing		\$5.00	May Be
23	7:	0	28						Trust Fund Contribution		Added t	
	Zip	Country	Zip		—	ountry	,	8.	This corporation has liability for i			199.032,
24	Q Name	and Address of Current i	29 Registered	I Agent	30				Florida Statutes Name and Address of New Re	Yes N		
Name and Address of Current Registered Agent						81	Name	10.	Italije aliu Audiese Ul Hew He	Sieriera wae	····	······································
:	MILLER, ROBERT K	,				L						
	2975 OVERSEAS H					82	Street Add	Street Address (P.O. Box Number is Not Acceptable)				
I	MARATHON FL 330					83						
	MANATION I'L 330	J 3 U				L						
						84				FL ⁸	- I .	
11	 Pursuant to the provision office or registered ac 	ions of Sections 617.0502	and 617.15	08, Florida Statut	es, the	above	e-named cor	poration	n submits this statement for the popular of directors. I hereby acception	urpose of cha	nging its	registered
	agent. I am familiar wi	ith, and accept the obligation	ons of, Sec	tion 617.0503, Flo	orida St	atutes	s.	uon s D	oard of directors. Thereby accep	ч ине арронии	INDIIL BIS I	eğistered
SI	GNATURE	or printed name of registered agent i	and title if earli	cable (NOT)	F: Razieta	red And	ent signature requ	lead when	enjachtlost	DATE		
12		OFFICERS AND I			13		in educina redo		ADDITIONS/CHANGES TO OFFIC		RECTOR	S IN 12
TIT	LF T			DELETE	1.1	TITLE	·····	•	10-11-11-11-11-11-11-11-11-11-11-11-11-1		Change	Addition
NA	ME GRADIC	K, KATHARINE S			1.2	NAME					•	
STE		12575 OVERSEAS HIGHWAY				1.3 STREET ADDRESS						
CIT		ION FL 3305	>			CITY-S						
ΤίΤ				DELETE		TITLE					Change	Addition
NA	ME BRADY,	WILLIAM H. JR			2.2	NAME						
ST	REET ADDRESS 7760 AV	'IATION BLD			2.3	STREET	ADDRESS					
CIT	Y-ST-ZIP MARATH	ION FL 3305	0		2.4	CITY-S	ST-ZIP					
10	if VPD			DELETE	3.1	TITLE					Change	Addition
NA					32	NAME						
STE	REET ADDRESS 210 BRU	JCE COURT			3.3	STREET	ADDRESS					
CIT	y-st-zip MARATH	ION FL るちひり	50		3.4.	CITY-S						
TIT				DELETE	4.1	TITLE	-	Ba	SOWK HARD	'D'	Change	Addition
NA		IS, DAVID			4.2	NAME	<u> </u>	13	eown, Haroi	GLIA		
STE		ÆRSEAS HWY			4.3	STREET	ADDRESS	M-	MANAGE CO			
	Y-ST-ZIP MARATH	ion fl				CITY - S	T-ZIP	1-10	rather, Fl.			
ħΠ				DELETE		TITLE					Change	Addition
NA	w/ m	•				NAME						
STF		SEAVIEW DR			5.3	STREET	ADDRESS					
		EY FL 33050				CITY - S	T-ZIP					
1/1	•			DELETE	R	TITLE	1				Change	Addition
NAI		EDITH F			6.2	NAME						
	1	TATION BLVD.			6.3	STREET	ADDRESS					
CIT	Y-ST-ZIP MARATH	ION FL 33	220		6.4	CITY-S	T-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)(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.

SIGNATURE: The the vine B. Crea Ball HE Elebante & Franch 2/13/97 289-0876
SIGNATURE and TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date Date Dayling Prove / 0024774