

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 17, 2006 8:00 am
Secretary of State

02-17-2006 90085 040 ****61.25

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|--|---|---|--|---|--|
| DOCUMENT # 758390 1. Entity Name MARATHON YACHT CLUB, INC. | | | | | |
| Principal Place of Business 825 33RD ST., GULF MARATHON, FL 33050 | | | Mailing Address 825 33RD ST., GULF 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 59-1164934 | |
| | | | | 5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required | |
| 6. Name and Address of Current Registered Agent | | | 7. Name and Address of New Registered Agent | | |
| TONY GROSSE, MGR. 825 33RD ST. GULF MARATHON, FL 33050 | | | Name Street Address (P.O. Box Number is Not Acceptable) City <div style="text-align: right;"> FL Zip Code </div> | | |
| 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 (NOTE: Registered Agent signature required when reappointing) 2/10/06 DATE | | | | | |
| Filing Fee is \$61.25 Due by May 1, 2006 | | 9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees | | Make check payable to Florida Department of State | |
| 10. OFFICERS AND DIRECTORS | | | 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 | | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | P FERGUSON, RON 825 33RD ST. GULF MARATHON, FL 33050 | <input checked="" type="checkbox"/> Delete | TITLE NAME STREET ADDRESS CITY-ST-ZIP | P-D WAGNER, LARRY 825 33RD ST. GULF MARATHON, FL 33050 | <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | P HUNDHAMMER, FRED 825 33RD ST GULF MARATHON, FL 33050 | <input checked="" type="checkbox"/> Delete | TITLE NAME STREET ADDRESS CITY-ST-ZIP | V BURNETT, CLYDE 825 33RD ST. GULF MARATHON, FL 33050 | <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | S PETTIT, SHARON 825 33RD ST., GULF MARATHON, FL 33050 | <input checked="" type="checkbox"/> Delete | TITLE NAME STREET ADDRESS CITY-ST-ZIP | V SMITH, TOM 825 33RD ST. GULF MARATHON, FL 33050 | <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | D WAGNER, LARRY 825 33RD ST GULF MARATHON, FL 33050 | <input checked="" type="checkbox"/> Delete | TITLE NAME STREET ADDRESS CITY-ST-ZIP | S CHRISTINE WILD 825 33RD ST. GULF MARATHON, FL 33050 | <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | T SMITH, TOM 825 33RD ST GULF MARATHON, FL 33050 | <input checked="" type="checkbox"/> Delete | TITLE NAME STREET ADDRESS CITY-ST-ZIP | T-D FRED HUNDHAMMER 825 33RD ST. GULF MARATHON, FL 33050 | <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | D BURNETT, CLYDE 825 33RD ST GULF MARATHON, FL 33050 | <input checked="" type="checkbox"/> Delete | TITLE NAME STREET ADDRESS CITY-ST-ZIP | D RON FERGUSON 825 33RD ST. GULF MARATHON, FL 33050 | <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition |
| 12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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: 1/12/06 (305) 3047874 | | | | | |
| SIGNATURE AND TITLED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Day and Phone # | | | | | |