

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

SECRETARY OF STATE
DIVISION OF CORPORATIONS
10 FEB -3 AM 8:52

DOCUMENT # K27430

1. Corporation Name

MARATHON MANAGEMENT COMPANY, INC.

2. Principal Office Address - No P.O. Box #

3400 Gulf Blvd.

Suite, Apt. #, etc.

206

City & State

Bellair Beach, FL

Zip

33786

Country

Pinellas

3. Mailing Office Address

3400 Gulf Blvd.

Suite, Apt. #, etc.

206

City & State

Bellair Beach, FL

Zip

33786

Country

Pineallas

100167915181
02/03/10--01033--023 **908.75
CRZE081 (1/1/09)

4. Date Incorporated or Qualified
To Do Business in Florida

6/30/1988

5. FEI Number

65-0062696

☐ Applied For

☐ Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☒

\$8.75 Additional Fee required
for a Certificate of Status

7. Name and Address of Current Registered Agent

Name

Betty Stoner

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

3400 Gulf Blvd.

Suite, Apt. #, Etc.

206

City

Bellair Beach

State

FL

Zip Code

33786

☒ The reinstatement fee is imposed, except in
circumstances which the entity did not receive
the prior notices. By checking this box, you
are certifying the prior notices were not
received and requesting the reinstatement
fee be waived.

8. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of section 607.0505 or 617 0503, F.S.

Signature of
Registered Agent

Betty Stoner
REGISTERED AGENT MUST SIGN

Date 1/29/2010

9. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

Titles	Name of Officers and/or Directors	Street Address of Each Officer and/or Director	City / State / Zip
Pres	Richard E. Stoner	215 Wood Trace	Benton, KY 42025
VP	Robin O'Malley	526 Kingwood Dr. #359	Kingwood, TX 77339
ST	Betty Stoner	3400 Gulf Blvd. # 206	Bellair Beach, FL 33786

REINSTATEMENT 05-10 B2/8/10

10. E-mail Address: marathonatpex@aol.com

(To be used for future annual report notification)

11. I certify that I am an officer or director or the receiver or trustee empowered to execute this application as provided for in chapter 607 or 617, F.S. I further certify that when filing this reinstatement application, the reason for dissolution has been eliminated, the corporate name satisfies the requirements of section 607.0401 or 617.0401, F.S., that all fees owed by the corporation have been paid. I further certify, the information indicated on this application is true and accurate, and my signature shall have the same legal effect as if made under oath.

SIGNATURE:

Betty Stoner

Betty Stoner

1/29/2010

270-527-0417

Daytime Phone #