2008 NOT-FOR-PROFIT CORPORATION
- ANNUAL REPORT (AR)

## Feb 11, 2008 8:00 am DOCUMENT # N37156 **Secretary of State** 1. Entity Name 02-11-2008 90043 010 \*\*\*\*61.25 MARATHON CHURCH OF CHRIST, INC. Principal Place of Business Mailing Address 352 26 STREET OCEAN 352 26 STREET OCEAN MARATHON FL 33036 MARATHON FL 33036 2. Principal Place of Business - No P.O. Box # 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 1st MOORE CR2E037 (10/07) City & State City & State 4. FEI Number Applied For 59-2330586 Not Applicable Zip Country Zio Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent SUEST, HAYMUND H 83201-OLD HWY UNIT 208 /268 92 4 OT OCLAM GUEST, RAYMOND R Street Address (P.O. Box Number is Not Acceptable) MARATHON FL 33050 8. The above named entity submits this statement to 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 1 · 31 · 08 Make Check Payable to FILE NOW: FEE IS \$61.25 9. Election Campaign Financing \$5.00 May Be Due By May 1, 2008 Trust Fund Contribution Added to Fees Florida Department of State OFFICERS AND DIRECTORS 10. 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 Delete TITLE Change Addition RING, GARLAND NAME NAME 29686 SARATOGA AVE STREET ADDRESS STREET ADDRESS BIG PINE KEY FL 33043 CITY - ST - ZIP CITY-ST-Z'P TITLE ☐ Delete □ Change Addition BUCHANAAN, RYAN MALLE 254 26TH STREET OCEAN STREET ADDRESS STREET ADDRESS MARATHON FL 33050 CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE Change ☐ Addition NAME GUEST, RAYMOND NAME 1268 92TH COURT OCEAN STREET ADDRESS STREET ADDRESS MARATHON FL 33050 CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition **BUCNANAN, STEVE** NAME STREET ADDRESS 254 26TH STREET OCEN STREET ACCIPESS MARATHON FL 33050 CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE ☐ Change ☐ Addition NAME STREET AUDRESS STREET ACOPESS CITY-ST-ZIP CITY-ST-ZiP TAILE Delete TITLE Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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:

Haymond Land

1.31.08

305.743.7323

FILED