2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 13, 2006
Secretary of State

DOCUMENT# N38606

Entity Name: MARATHON INTERNATIONAL BONEFISH CLUB, INC.

Current Principal Place of Business:

% LINDSAY E. RABITO
297 NORTH ANGLERS DRIVE
MARATHON, FL 33050

New Principal Place of Business:

Current Mailing Address:

PO BOX 914
MARATHON, FL 33050

New Mailing Address:

FEI Number: 65-0206770 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

RABITO, LINDSAY E
297 NORTH ANGLERS DRIVE
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: D ( ) Delete
Name: KEY, DANIEL
Address: 50 LAS BRISAS CT
City-St-Zip: SUGARLOAF KEY, FL 33044

Title: D ( ) Delete
Name: CHAPLIN, BETTY
Address: 400 CORTE DEL BRISAS
City-St-Zip: MARATHON, FL

Title: D ( ) Delete
Name: HEWLETT, JACQUELINE
Address: 717 96TH ST. OCEAN
City-St-Zip: MARATHON, FL

Title: D ( ) Delete
Name: GAINES, MINDY
Address: 309 ANGLERS DR N
City-St-Zip: MARATHON, FL 33050

Title: D ( ) Delete
Name: LINDSAY, RABITO
Address: 297 N ANGLERS DR
City-St-Zip: MARATHON, FL 33050

Title: D ( ) Delete
Name: GUNTHER, FRANCES
Address: 105 SAGURO LANE
City-St-Zip: MARATHON, FL 33050

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 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 an address, with all other like empowered.

SIGNATURE: MINDY GAINES D 03/13/2006

Electronic Signature of Signing Officer or Director — Date