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CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandor B. Morahan
Secretary of State
DIVISION OF CORPORATIONS

APPROVED
FILED

95 APR 18 PM 10:42

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # N42194

(3)

1. Corporation Name

ZONTA CLUB OF MARATHON, INC.

Principal Place of Business

Mailing Address

P O BOX 672
MARATHON FL 33050

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MARATHON FL 33050

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

02/19/1991

3a. Date of Last Report

04/25/1994

4. FBI Number

NOT APPLICABLE

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐

\$5.00 May Be
Added to Fees

7. Nonprofit with IRS 501(c)(3)
Tax Exempt Status

☐

\$68.75 Supplemental
Fee Not Required

8. This corporation has liability for intangible tax under S. 193.032,
Florida Statutes

☐ Yes ☐ No

2. Principal Place of Business

2a. Mailing Address

21

25

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

MILLER, RICHARD K.
2975 OVERSEAS HIGHWAY
MARATHON FL 33050

81 Name

Miller, Robert K.

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

2975 OVERSEAS HWY

83

84 City

Marathon

FL

85

Zip Code

33050

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and address

(NOTE: Registered Agent signature required when reappointing)

DATE

4/3/95

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	PD
NAME	HUFF, PATRICIA
STREET ADDRESS	210 SCHOONER LN
CITY-ST-ZIP	DUCK KEY FL
TITLE	VD
NAME	BESSEMER, SANDY
STREET ADDRESS	8062 PORPOISE DR
CITY-ST-ZIP	MARATHON FL
TITLE	TD
NAME	REED, MARCY
STREET ADDRESS	11100 OVERSEAS HWY
CITY-ST-ZIP	MARATHON FL
TITLE	SD
NAME	GREENE, LUCINDA
STREET ADDRESS	5701 OVERSEAS HWY
CITY-ST-ZIP	SUMMERLAND KEY FL
TITLE	D
NAME	BOSSERT, SHARON
STREET ADDRESS	700 39 ST
CITY-ST-ZIP	MARATHON FL
TITLE	D
NAME	MARTIN-BEGUE, SHELLEY
STREET ADDRESS	2020 MANOR LN
CITY-ST-ZIP	MARATHON FL

1.1 TITLE	PD
1.2 NAME	Helbling, June
1.3 STREET ADDRESS	970 - 95th St., Ocean
1.4 CITY-ST-ZIP	Marathon, Fl. 33050
2.1 TITLE	VD
2.2 NAME	Bossert, Sharon
2.3 STREET ADDRESS	700 - 39th St.
2.4 CITY-ST-ZIP	Marathon, Fl. 33050
3.1 TITLE	TD
3.2 NAME	Brown, Linda
3.3 STREET ADDRESS	Rt. 1 Box 219 (219 BAILEY ST)
3.4 CITY-ST-ZIP	Marathon, Fl. 33050
4.1 TITLE	SD
4.2 NAME	Bessener, Sandy
4.3 STREET ADDRESS	P.O. Box 2524 (8062 PORPOISE DRIVE)
4.4 CITY-ST-ZIP	Marathon, Fl. 33050
5.1 TITLE	D
5.2 NAME	Cadiz, Mary
5.3 STREET ADDRESS	2490 HARBOR Dr.
5.4 CITY-ST-ZIP	Marathon, Fl. 33050
6.1 TITLE	D
6.2 NAME	Fernandes, Lorine
6.3 STREET ADDRESS	P.O. Box 510218 (180 3RD ST)
6.4 CITY-ST-ZIP	Key Colony Bch., FL. 33051-0298

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 118.07(3)(b), 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:

June Helbling, President

SIGNATURE AND TITLE OF REGISTERED AGENT OR DIRECTOR

2-21-95

305-743-7845

Date

System Phone #