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NONPROFIT CORPORATION ANNUAL REPORT

SIGNATURE:



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

	996 ENT # N9300	0001597	7 (4)						
DOCUMENT # N9300001597 (4)  MARATHON IN ACTION, INC.									
rincipal Place o	f Business	Mailing Addres	3S				90iil Baill Adibi		<b>5</b> )
P.O. BOX 52254		P.O. BOX 523 MARATHON S		33052					
						<ol> <li>Date incorporated or Qualified 04/05/1993</li> </ol>		of Last R 2/17/19	
. Principal Plac	ce of Business	2a. Mailing Ad	dress			4. FEI Number		<u> </u>	oplied For ot Applicable
		Suite, Apt	# etc			65-0410106			Additional
Suite, Apt. #,	etc.	27 Stille, Apr.	. #, <del>0</del> 10.			Certificate of Status Desired			equired
City & State		City & Star	te			Election Campaign Financing     Trust Fund Contribution			May Be to Fees
Zip	Country	Zip		Country 30		This corporation has liability for in Florida Statutes	intangible tax	under s. 1 No	99.032,
<u> </u>	25] 9. Name and Address of Curre	29 ent Registered Age	nt	1301		10. Name and Address of New R	egistered A	gent	
				81	Name				
	N D. GREENMAN PROFESSION	AL ASSOCIAT		82	Street Ac	idress (P.O. Box Number is Not Acceptab	ile)		
••	ERSEAS HWY			83					
SUITE 40					City	FL 85 Zip Code			
	JINETE SOUDU			84	U City		- FL		
MARATH		02 and 617.1508, Flo	orida Statute		<u> </u>	poration submits this statement for the pu	roops of ober	nging its re	igistered offici apent I am
MARATHI 11. Pursuant to or registere familiar wit	the provisions of Sections 617.050 ad agent, or both, in the State of Flo h, and accept the obligations of, Se	ection 617.0503, Flori	ida Statutes.	es, the above- ed by the corp	named corporation's be	poration submits this statement for the purposed of directors. I hereby accept the app	rpose of char pointment as r	nging its re registered	igistered offic agent. I am
MARATHI 11. Pursuant to or registere familiar with SIGNATURE	the provisions of Sections 617.050 ad agent, or both, in the State of Flo in, and accept the obligations of, Sec Signilure, typed or printed name of registered age	ent and little if applicable.	ida Statutes.	es, the above- ed by the corp	named corporation's be	poration submits this statement for the purporation of directors. I hereby accept the appured when reinstating!  ADDITIONS/CHANGES TO OFF	rpose of char cointment as r		
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