


2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 14, 2008 8:00 am
Secretary of State

04-14-2008 90020 010 ****61.25

DOCUMENT # N99000003105 1. Entity Name MARATHON ALUMNI ATHLETIC CLUB, INC.					
Principal Place of Business 423 80TH ST, OCEAN MARATHON, FL 33050				Mailing Address 423 80TH ST, OCEAN MARATHON, FL 33050	
2. Principal Place of Business - No P.O. Box #		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State			
Zip	Country	Zip	Country	4. FEI Number 65-0923878	
5. Certificate of Status Desired <input type="checkbox"/>				\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent				7. Name and Address of New Registered Agent	
WOODLAND, KEVIN 423 80TH ST, OCEAN MARATHON, FL 33050				Name Street Address (P.O. Box Number is Not Acceptable) City <div style="display: flex; justify-content: space-between;"> FL Zip Code </div>	
8. 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. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE _____ DATE _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>					
Filing Fee is \$61.25 Due by May 1, 2008		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		\$5.00 May Be Added to Fees	
Make check payable to Florida Department of State					
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE	P	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	WOODLAND, KEVIN C		NAME		
STREET ADDRESS	423 80TH STREET, OCEAN		STREET ADDRESS		
CITY-ST-ZIP	MARATHON, FL 33050		CITY-ST-ZIP		
TITLE	VP	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	PUTO, MICHAEL H		NAME		
STREET ADDRESS	700 89TH STREET, OCEAN		STREET ADDRESS		
CITY-ST-ZIP	MARATHON, FL 33050		CITY-ST-ZIP		
TITLE	T	<input checked="" type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	
NAME	BETANCOURT, GRIMI		NAME	T BISHOP, DENNIS M.	
STREET ADDRESS	5800 OVERSEAS HWY, #43		STREET ADDRESS	8085 OVERSEAS HIGHWAY	
CITY-ST-ZIP	MARATHON, FL 33050		CITY-ST-ZIP	MARATHON, FL 33050	
TITLE	D	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	WOODLAND, ROBIN		NAME		
STREET ADDRESS	423 80TH STREET, OCEAN		STREET ADDRESS		
CITY-ST-ZIP	MARATHON, FL 33050		CITY-ST-ZIP		
TITLE	D	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	SCHMITT, BRUCE		NAME		
STREET ADDRESS	11100 OVERSEAS HIGHWAY		STREET ADDRESS		
CITY-ST-ZIP	MARATHON, FL 33050		CITY-ST-ZIP		
TITLE	D	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	GRADICK, KATHERINE S		NAME		
STREET ADDRESS	12595 OVERSEAS HWY		STREET ADDRESS		
CITY-ST-ZIP	MARATHON, FL 33050		CITY-ST-ZIP		
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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: <u>Kevin C. Woodland</u> Kevin C. Woodland 4/4/08 305-743-1853 <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #</small>					