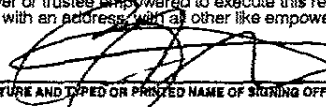


**2004 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED

**Apr 09, 2004 08:00 AM
Secretary of State**

DOCUMENT # P00000036610		
1. Entity Name MARATHON HANGAR DEVELOPMENT, INC.		
Principal Place of Business 11100 IVERSEAS HWY. MARATHON, FL 33050	Mailing Address 11100 IVERSEAS HWY. MARATHON, FL 33050	
DO NOT WRITE IN THIS SPACE		
5. Name and Address of Current Registered Agent WRIGHT, THOMAS D 9711 QVERSEAS HWY MARATHON, FL 33050		DO NOT WRITE IN THIS SPACE
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 _____ Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reconstituting)		
FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$350.00		9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees
000000108333 04/03/04 00053 007 150.00		
10. OFFICERS AND DIRECTORS		
TITLE NAME STREET ADDRESS CITY - ST - ZIP	PD CHRISTENSEN, DANIEL 11100 IVERSEAS HWY. MARATHON, FL 33050	DO NOT WRITE IN THIS SPACE
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VD SCHINDLER, MARVIN 11100 IVERSEAS HWY. MARATHON, FL 33050	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	STD SCHMITT, BRIAN C 11100 IVERSEAS HWY. MARATHON, FL 33050	
TITLE NAME STREET ADDRESS CITY - ST - ZIP		
TITLE NAME STREET ADDRESS CITY - ST - ZIP		
TITLE NAME STREET ADDRESS CITY - ST - ZIP		
12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 607, 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: 		3/31/04 Date
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		305 743 5187 Daytime Phone #