FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P98000074553

Corporation Name

MARATHON MORTGAGE, INC.

Principal Place of Business

Mailing Address

2a. Mailing Address

260 EAST LAKEWOOD ROAD WEST PALM BEACH FL 33405

2. Principal Place of Business

260 EAST LAKEWOOD ROAD WEST PALM BEACH FL 33405

FILED May 17, 1999 8:00 am Secretary of State

05-17-1999 90067 036 ***150.00



DO NOT WRITE IN THIS SPACE

Applied For

3. Date Incorporated or Qualifed

08/24/1998 4. FEI Number

Sulle, Apt. #, etc. Sulle, Apt. #, etc.	21		26			_		60-60-60	-/	:Not	··Applicable - [·	
City & State City &	Suite, Apt.	#, etc.										
Zip Country Zip Country Zip Gountry Zip Gountry Sa. This corporation owes the current year intengible Personal Property Tax. Yes Name and Address of Current Registered Agent Simple Name and Address of New Registered Agent Simple Name Name and Address of New Registered Agent Simple Name Nam	City & State			7			_				, ,	
38 Name and Address of Current Registered Agent 10, Name and Address of New Registered Agent 10, Name and Name Address of New Registered Agent 10, Name and Address of New Registered Agent 10, Name and Name Address of New Registered Agent 10, Name and Name Address of New Registered Agent 10, Name and Address of New Registered Agent 10, Name and Name Address of New Registered Agent 10, Name and Name Address of New Registered Agent 10, Name and Name Address of New Registered Agent 10, Name and Name Address of New Registered Agent 10, Name and Name Address of New Registered Agent 10, Name and Name Address of New Registered Agent 10, Name and Name and Name Address of Name Address of Name Addition 10, Name and Name Address of Name Addition 10, Name and Name Addition 10, Name and Name Addition 10, Name and Name and Name Addition 10, Name and Name and Name Addition 10, Name and Name Addition 10, Name and Name Addition 10, Name and Name and Name Addition 10, Name and Name and Name Addition 10, Name and Name Additio		Country	20		Country	,			ent vear Int	angible		
9. Name and Address of Current Registered Agent MILLER, MICHAEL J 260 EAST LAKEWOOD ROAD WEST PALM BEACH FL 33405 19. Street Address (P.O. Box Number is Not Acceptable) 29. Street Address (P.O. Box Number is Not Acceptable) 29. Street Address (P.O. Box Number is Not Acceptable) 30. Beach FL 33405 40. City FL 85 Zip Code 11. Pursuant to the provisions of Sections 607.0502 and 607.1508. Florida Statutes, the above-named corporation submits His statement for the purpose of changing its registered agent. a manufact with, and accept the obligations of Sections 607.0505 Florida Statutes. SIGNATURE 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS 11. TITLE 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS 11. TITLE 14. ITILE 15. INME 260 EAST LAKEWOOD ROAD WEST PALM BEACH FL 33405 16. INTER CORESS 17. ST.2P 18. ITILE 18. I	\neg		100	,				· ·	ent year nit		No	
MILLER, MICHAEL J 260 EAST LAKEWOOD ROAD WEST PALM BEACH FL 33405 82 Street Address (P.O. Box Number is Not Acceptable) 83	24				<u>'</u>				Registered	Agent		
MILLER, MICHAEL J 260 EAST LAKEWOOD ROAD WEST PALM BEACH FL 33405 82 Street Address (P.O. Box Number is Not Acceptable) 83 84 City	9. Mame and Audress of Current registered Agent						Name	10: 1141110 41141 /				
280 EAST LAKEWOOD ROAD WEST PALM BEACH FL 33405 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 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 office or registered agent, or both, in the State of Florida Statutes. SIGNATURE SIGNATURE 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 1. 11. TITLE 12. NAME 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 1. 12. OFFICERS AND DIRECTORS IN 1. 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 1. 14. TITLE 15. TITLE 15	MILLER MICHAEL I											
WEST PALM BEACH FL 33405 84 City FL 85 Zip Code 11. Pursuant to the provisions of Sections 607 0502 and 607 1508. Finds Statutes, the above-named corporation submits His 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 sport. I am findlish with, and accept the obligations of, Section 607 0505, Florida Statutes. SIGNATURE SIGNATURE OFFICERS AND DIRECTORS 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 1 INTILE NAME 11. TITLE DIMILER, MICHAEL J 20 ASST LAKEWOOD ROAD WEST PALM BEACH FL 33405 ITILE OBLETE 11. TITLE DELETE 12. TITLE 12. NAME 13. TITLE 14. CITY-ST-ZP TITLE 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 1 12. NAME 14. CITY-ST-ZP TITLE DELETE 21. TITLE 22. NAME 33. STREET ADDRESS CITY-ST-ZP TITLE DELETE 31. TITLE 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 1 14. CITY-ST-ZP TITLE 15. TITLE 16. Change Addition ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 1 15. TITLE	260 EAST LAKEWOOD ROAD					82 Street Address (P.O. Box Number is Not Acceptable)						
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florids Statutes, the above-named corporation submits affis statement for the purpose of changing its registered agent, or both, in the State of Florids. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent and one of the purpose of changing its registered agent and accept the obligations of, Section 607.0505, Florids Statutes. SIGNATURE Signature, typed or printed name of registered agent and tibe if applicables OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 1. TITLE OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 1. 12. NAME STREET ADDRESS CITY-ST-ZIP WEST PALM BEACH FL 33405 14. CITY-ST-ZIP DELETE 13. TITLE OChange CATE ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 1. 12. NAME 22. NAME 23. STREET ADDRESS CITY-ST-ZIP OELETE 31. TITLE OELETE 31. TITLE OELETE 31. TITLE OELETE 31. TITLE OChange Addition Addition NAME 32. NAME 33. STREET ADDRESS CITY-ST-ZIP TITLE OELETE 31. TITL						02						
11. Pursuant to the provisions of Sections 607 0502 and 607 1508. Florids 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. Studies and in the State of Florida. Studies and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Signature, upped or provide name of registered agent and too if repotation. (NOTE Registered Agent signature regarded white remission) 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 1. TILE 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 1. TILE 12. OFFICERS AND DIRECTORS IN 1. 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 1. 14. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 1. 15. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 1. 16. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 1. 17. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 1. 18. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 1. 19. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 1. 10. Change Addition of the state of the purpose												
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 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, 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, and marked the provisions of Section 607.0505, Florida Statutes, the above-named corporation's board of directors. I hereby accept the appointment as registered agent, and marked by the corporation's board of directors. I hereby accept the appointment as registered agent, and marked by the corporation's board of directors. I hereby accept the appointment as registered agent, and marked by the corporation's board of directors. I hereby accept the appointment as registered agent, and marked by the corporation's board of directors. I hereby accept the appointment as registered agent, and the provision of the provision of directors. I hereby accept the appointment as registered agent, and the provision of directors. I hereby accept the appointment as registered agent, and the provision of directors. I hereby accept the appointment as registered agent, and the provision of directors. I hereby accept the appointment as registered agent, and the provision of directors. I hereby accept the appointment as registered agent, and the provision of directors. I hereby accept the appointment as registered agent, and the provision of directors. I hereby accept the appointment as registered agent, and the provision of directors. I hereby accept the appointment as registered agent, and the provision of directors. I hereby accept the appointment as registered agent, and the provision of directors. I hereby accept the appointment as registered agent, and the provision of directors. 12. Deleter and the provision of directors. I hereby accept the					84	1	City			85 Zip C	ode	
office or registered agent, or both, in the State of Florida. Such change was autmonzed by the corporation's board of directors. Thereby accept the applications of Section 607 6959. Florida Statutes. SIGNATURE Signature Triangle Trian	_				<u></u> ļ_	<u> </u>						
Signature, typed or printed harme of registered agent and site if applicables (NOTE: Registered Agent stynature required Wheth introduction) Signature, typed or printed harme of registered agent and site if applicables (NOTE: Registered Agent stynature required wheth introduction) Signature, typed or printed harmonic production Signature, typed or printed harmonic printed Signature, typed or printed harmonic pri	office or re agent. I ar	edistered agent, or both, in the State of	' Flor	nda. Such change was auth	onzea by	' tne	named corpor e corporation	ation submits this statement for the 's board of directors. I hereby acce	pt the appoi	ntment as reg	gistered	
12.	SIGNATURE	Signature, typed or printed name of registered agent a	and title	e if applicable. (NOTE: Re	gistered Age	nt si	ignature required v	when reinstating)	DATE		. 	
TITLE					13.			ADDITIONS/CHANGES TO OF	FICERS AN	ID DIRECTO	RS IN 1	
MILLER, MICHAEL J STREET ADDRESS CITY-ST-ZP WEST PALM BEACH FL 33405 TITLE DELETE 21 MARE 22 MARE 23 STREET ADDRESS CITY-ST-ZP TITLE DELETE 31 TITLE STREET ADDRESS CITY-ST-ZP TITLE DELETE 31 TITLE STREET ADDRESS CITY-ST-ZP TITLE STREET ADDRESS CITY-ST-ZP TITLE DELETE 31 TITLE STREET ADDRESS CITY-ST-ZP TITLE STREET ADDRESS CITY-ST-ZP TITLE ANAME STREET ADDRESS CITY-ST-ZP TITLE STREET ADDRESS STREET ADDRESS CITY-ST-ZP TITLE S	T											
STREET ADDRESS STREET ADDRESS 13 STREET ADDRESS 14 CITY-ST-ZIP	NAME	MILLER MICHAEL J			1.2 NAME						. 7	
CITY-ST-ZIP		•			13 STREE	TAF	ODRESS .					
TITLE	i i						Į .			,	·	
NAME		WEST FALM BLACITYL 33405		□ DELETE		3142	-11			☐ Change	Addition	
23 STREET ADDRESS 2.4 CITY-ST-ZIP	ì			F. 9222.2							_	
CITY-ST-ZIP	l j	-					nnpess				`	
TITLE												
NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP DELETE A1 TITLE A2 NAME A2 NAME A2 NAME A3 STREET ADDRESS CITY-ST-ZIP TITLE DELETE 51 TITLE STREET ADDRESS CITY-ST-ZIP TITLE DELETE 51 TITLE STREET ADDRESS CITY-ST-ZIP TITLE DELETE 51 TITLE STREET ADDRESS CITY-ST-ZIP 52 NAME 52 NAME 53 STREET ADDRESS CITY-ST-ZIP 54 CITY-ST-ZIP 55 TITLE 56 NAME 57 NAME 58 NAME 58 NAME 59 NAME 50 NAME 50 NAME 50 NAME 50 NAME 50 NAME 51 NAME 51 NAME 52 NAME 53 STREET ADDRESS CITY-ST-ZIP 56 NAME 57 NAME 58 NAME 58 NAME 59 NAME 50 NAME 50 NAME 50 NAME 50 NAME 51 NAME 51 NAME 51 NAME 52 NAME 53 STREET ADDRESS 64 CITY-ST-ZIP 66 NAME 51 NAME 51 NAME 51 NAME 51 NAME 52 NAME 53 STREET ADDRESS 66 NAME 51				□ nei ete		\$1-2	<u> </u>			Change	☐ Addition	
STREET ADDRESS												
CITY-ST-ZIP	NAME											
DELETE	STREET ADDRESS						1				}	
NAME	CITY-ST-ZIP					ST-Z	ZIP			Change	[7 Addition	
STREET ADDRESS	TITLE			☐ DELEIE			İ			☐ Criange		
A4 CITY-ST-ZIP	NAME						}					
TITLE DELETE 5.1 TITLE Change Addition NAME 52 NAME 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY-ST-ZIP Change Addition TITLE DELETE 6.1 TITLE Change Addition NAME 62 NAME STREET ADDRESS 6.3 STREET ADDRESS CITY-ST-ZIP 6.4 CITY-ST-ZIP 6.4 CITY-ST-ZIP	STREET ADDRESS				4.3 STREE	ET AL	DDRESS				}	
NAME	CITY-ST-ZIP				_	ST-Z	ZIP			——————————————————————————————————————		
\$1.5.3.5.TREET ADDRESS 5.3.5.TREET ADDRESS 5.4.CITY-ST-ZIP 5.4.CITY-ST-ZIP Change Addition Additio	TITLE			☐ DELETE	•					∐ Change	☐ Addition	
5.4 CITY-ST-ZIP	NAME											
DELETE	STREET ADORESS				5.3 STREE	TAE	DDRESS				ļ	
TITLE DELETE 6.1 TITLE Change Addition NAME 62 NAME STREET ADDRESS 63 STREET ADDRESS CITY-ST-ZIP 64 CITY-ST-ZIP	CITY-ST-ZIP	_				ST-Z	ZIP					
STREET ADDRESS 63 STREET ADDRESS CITY-ST-ZIP 64 CITY-ST-ZIP				☐ DELETE	6.1 TITLE					Change	Addition	
CITY-ST-ZIP 6.4 CITY-ST-ZIP	NAME				6.2 NAME						l	
CITY-ST-ZIP 8.4 CITY-ST-ZIP	STREET ADDRESS				6.3 STREE	ET A	DDRESS					
of the first of th	CITY-ST-ZIP											
14. Thereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(1), Florida Statutes. Turther certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(1), Florida Statutes. Turther certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(1), Florida Statutes. Turther certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(1), Florida Statutes. Turther certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(1), Florida Statutes. Turther certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(1), Florida Statutes. Turther certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(1), Florida Statutes.	14 I hereby (certify that the information supplied with	this	filing does not qualify for th	e exemp	tion	n stated in Se	ection 119.07(3)(i), Florida Statutes.	I further ce	rtify that the in	nformation	

4. 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 informatio 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 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE

SIGNATURE AND TYPED OR PAINTED PAME OF SIGNING OFFICER OR DIRECTOR

Daytime Phone #

Date

R2E034 (11/98)