

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000131074

Entity Name: MARATHON SYSTEMS, INC.

FILED  
Mar 28, 2007  
Secretary of State

**Current Principal Place of Business:**

1808 PARRISH DRIVE  
ROME, GA 30103

**New Principal Place of Business:**

14 LEGACY WAY SUITE E  
ADAIRSVILLE, GA 30103

**Current Mailing Address:**

1808 PARRISH DRIVE  
ROME, GA 30103

**New Mailing Address:**

14 LEGACY WAY SUITE E  
ADAIRSVILLE, GA 30103

FEI Number: 20-3527820

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

CORPORATION SERVICE COMPANY  
1201 HAYS STREET  
TALLAHASSEE, FL 323012525 US

**Name and Address of New Registered Agent:**

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.

SIGNATURE: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: PRES ( ) Delete  
Name: ARGUELLO, DANILO  
Address: 1808 PARRISH DRIVE  
City-St-Zip: ROME, GA 30103

Title: CONT ( ) Delete  
Name: MORROW, DONNA L  
Address: 1808 PARRISH DRIVE  
City-St-Zip: ROME, GA 30161

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: PRES (X) Change ( ) Addition  
Name: ARGUELLO, DANILO  
Address: 14 LEGACY WAY SUITE E  
City-St-Zip: ADAIRSVILLE, GA 30103

Title: CONT (X) Change ( ) Addition  
Name: MORROW, DONNA L  
Address: 14 LEGACY WAY SUITE E  
City-St-Zip: ADAIRSVILLE, GA 30103

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: DONNA MORROW

CONT

03/28/2007

\_\_\_\_\_ Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date