

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F06000004952

FILED
Jan 13, 2009
Secretary of State

Entity Name: THE PARACELSUS GROUP, INC.

Current Principal Place of Business:

1830 WOODPOINTE DR.
WINTER HAVEN, FL 33884

New Principal Place of Business:

Current Mailing Address:

1830 WOODPOINTE DR.
WINTER HAVEN, FL 33884

New Mailing Address:

FEI Number: 23-2973243 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

JENKINS, ROBERT E.
1830 WOODPOINTE DR.
WINTER HAVEN, FL 33884 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

OFFICERS AND DIRECTORS:

Title: DP () Delete
Name: JENKINS, ROBERT E
Address: 1830 WOODPOINTE DR.
City-St-Zip: WINTER HAVEN, FL 33884

Title: D () Delete
Name: MADAN, LEWIS
Address: 596 CREAMERY RD.
City-St-Zip: QUAKERTOWN, PA 18951

Title: D () Delete
Name: WASHINGTON, LEONARD
Address: 7425 SPAGUE STREET
City-St-Zip: PHILADELPHIA, PA 19119

Title: DV () Delete
Name: FEDELE, FRANK
Address: 900 NE TOWN TERRACE
City-St-Zip: JENSON BEACH, FL 34957

Title: DSTQ () Delete
Name: JENKINS, LINDA J
Address: 1830 WOODPOINTE DR.
City-St-Zip: WINTER HAVEN, FL 33884

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: D (X) Change () Addition
Name: MADAN, LEWIS
Address: 22 FOX LANE
City-St-Zip: UNION SPRINGS, NY 13160

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ROBERT E. JENKINS

PRES

01/13/2009

Electronic Signature of Signing Officer or Director

_____ Date