

**2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

**FILED  
Jan 27, 2009  
Secretary of State**

DOCUMENT# N25256

Entity Name: PANACEA FULL GOSPEL ASSEMBLY, INC.

**Current Principal Place of Business:**

8 TAYLOR ST  
PANACEA, FL 32346

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 465  
PANACEA, FL 32346 US

**New Mailing Address:**

FEI Number: 59-2890956      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

NICHOLS, CECIL  
U.S. HIGHWAY 98, BOX 56  
PANACEA, FL 32346 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: PD ( ) Delete  
Name: BARWICK, CHARLES E.,  
Address: P.O. BOX 465 N/A  
City-St-Zip: PANACEA, FL

Title: VD ( ) Delete  
Name: NICHOLS, CECIL,  
Address: P.O. BOX 56 N/A  
City-St-Zip: PANACEA, FL

Title: S ( ) Delete  
Name: BAYWICK, GLENDA  
Address: 1394 COASTAL HWY  
City-St-Zip: PANACEA, FL 32346

Title: T ( ) Delete  
Name: NICHOLS, LONA  
Address: 1332 COASTAL HWY  
City-St-Zip: PANACEA, FL 32346

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

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

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

Title: S (X) Change ( ) Addition  
Name: BARWICK, GLENDA  
Address: 1394 COASTAL HWY  
City-St-Zip: PANACEA, FL 32346

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: CHARLES E. BARWICK

PD

01/27/2009

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

\_\_\_\_\_  
Date