


2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 06, 2008 08:00 A
Secretary of State

DOCUMENT # 820630	
1. Entity Name CANNON OIL CORPORATION	

Principal Place of Business 1231 SOUTH FOSTER ST. P.O. DRAWER 6307 DOTHAN, AL 36301 US	Mailing Address P.O. BOX 6307 DOTHAN, AL 36302 US
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01232008 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number 63-0519689	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent SUTTLES, DONNA J 201 NO JAMES AVE. PANAMA CITY, FL 32401
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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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	P WEATHERS, FRANK J 1707 CTY RD 20 CLAYTON, AL 36016
TITLE NAME STREET ADDRESS CITY - ST - ZIP	SEC WEATHERS, PAMELA C 1707 CTY RD 20 CLAYTON, AL 36016
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VP WEATHERS, JONATHAN C 909 DERBYSHIRE DR DOTHAN, AL 36303
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	

DO NOT WRITE IN THIS SPACE

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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: Pam Weathers PAM WEATHERS 3-3-08 334-794-2776
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #