

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F94000006162

Entity Name: PROCYON CORPORATION

FILED
Jan 28, 2008
Secretary of State

Current Principal Place of Business:

1300 S HIGHLAND AVE
CLEARWATER, FL 33756 US

New Principal Place of Business:

Current Mailing Address:

1300 S HIGHLAND AVE
CLEARWATER, FL 33756 US

New Mailing Address:

FEI Number: 59-3280822

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ANDERSON, JAMES B
1300 S HIGHLAND AVE
CLEARWATER, FL 33756 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: CCEO () Delete
Name: ANDERSON, REGINA W
Address: 2350 NE COACHMAN RD.
City-St-Zip: CLEARWATER, FL 33765

Title: D () Delete
Name: SUGGS, FRED
Address: 60 FOREST LANE
City-St-Zip: GREENVILLE, SC 29605

Title: D () Delete
Name: WALLACK, CHESTER L
Address: 1132 S. LITTLE CREEK RD.
City-St-Zip: DOVER, DE

Title: D () Delete
Name: CRANE, ALAN
Address: RR #2
City-St-Zip: LARNED, KS

Title: DCFO () Delete
Name: ANDERSON, JAMES B
Address: 4277 AUSTON WAY
City-St-Zip: PALM HARBOR, FL 34685

Title: D () Delete
Name: SLOWGROVE, JEFFERY
Address: 1925 DIAMOND COURT
City-St-Zip: OLDSMAR, FL 34677

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JAMES B ANDERSON

CFO

01/28/2008

Electronic Signature of Signing Officer or Director

Date