2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# G15324

FILED Apr 13, 2009 Secretary of State

Entity Name: MARANDO, INCORPORATED **Current Principal Place of Business: New Principal Place of Business:** 5507 NORTH W STREET C/O FIRESIDE PHARMACY PENSACOLA, FL 32505 **New Mailing Address: Current Mailing Address:** 5507 NORTH W STREET C/O FIRESIDE PHARMACY PENSACOLA, FL 32505 FEI Number: 59-2249985 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: HOLLEY, DENNIS L HOLLEY, DENNIS L PRES 5507 NORTH W STREET 5507 NORTH W STREET PENSACOLA, FL 32505 US PENSACOLA, FL 32505 US 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: DENNIS L. HOLLEY 04/13/2009 Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution (). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete () Change () Addition HOLLEY, DENNIS Name: Name: 5507 NORTH 'W' ST Address: Address: City-St-Zip: PENSACOLA, FL City-St-Zip: Title: Title: () Change () Addition () Delete Name: HOLLEY, MARY G Name: 5507 NORTH W STREET Address: Address: PENSACOLA, FL 32505 City-St-Zip: 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: DENNIS L. HOLLEY **PRES** 04/13/2009