2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# H99432

Entity Name: MARION METAL WORKS, INCORPORATED

FILED Apr 29, 2009 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:
--------------------------------------	----------------------------------

4750 S PINE AVE OCALA, FL 34480 US

Current Mailing Address: New Mailing Address:

PO BOX 5037

OCALA, FL 34478 US

FEI Number: 59-2631380 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

BOURNE, LINDA L PRES
4450 NE 2ND ST
OCALA, FL 34470 US
BOURNE, LINDA L PRES
4750 S PINE AVE
OCALA, FL 34480 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: 04/29/2009

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Name:

Address: City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PST () Delete Title: PST (X) Change () Addition

 Name:
 BOURNE, LINDA
 Name:
 BOURNE, LINDA

 Address:
 4450 NE 2ND ST
 Address:
 4750 S PINE AVE

 City-St-Zip:
 OCALA, FL 34470
 City-St-Zip:
 OCALA, FL 34480

Title: VP () Delete Title: VP (X) Change () Addition Name: BOURNE, LINDA Name: BLANKENSHIP, LANA A

 Name:
 BOURNE, LINDA
 Name:
 BLANKENSHIP, LAN

 Address:
 4450 NE 2ND ST
 Address:
 4750 S PINE AVE

 City-St-Zip:
 OCALA, FL 34470
 City-St-Zip:
 OCALA, FL 34480

Title: TREA () Delete Title: () Change () Addition

 BOURNE, LINDA
 Name:

 4450 NE 2ND ST
 Address:

 OCALA, FL 34470
 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: LANA A BLANKENSHIP VP 04/29/2009