2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 18, 2008
Secretary of State

DOCUMENT# N01000000918

Entity Name: MARION CULTURAL ALLIANCE, INC.

Current Principal Place of Business:

23 SW BROADWAY ST
OCALA, FL 34474

New Principal Place of Business:

Current Mailing Address:

PO BOX 1571
OCALA, FL 34478

New Mailing Address:

FEI Number: 31-1760490 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

BEERS, CHERIE L
23 SW BROADWAY ST
OCALA, FL 34474 US

Name and Address of New Registered Agent:

LEDDING, NANCY C
23 SW BROADWAY ST
OCALA, FL 34474 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: NANCY C. LEDDING 04/18/2008
Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: VPD ( ) Delete
Name: ERGLE, GERALD
Address: 3631 SE 12TH PL
City-St-Zip: OCALA, FL 34471

Title: SD ( ) Delete
Name: MCCUNE, JESSICA
Address: 1230 SE 12TH ST
City-St-Zip: OCALA, FL 34471

Title: PC ( ) Delete
Name: BRITT, MARY H
Address: 4337 SILVER SPRINGS BLVD
City-St-Zip: OCALA, FL 34470

Title: CD ( ) Delete
Name: ROBINSON, STEWART L
Address: 23685 NE HWY 314
City-St-Zip: SALT SPRINGS, FL 32134

Title: TD ( ) Delete
Name: HAGIN, DENNIS
Address: 550 NE 25TH AVE
City-St-Zip: OCALA, FL 34470

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: PC (X) Change ( ) Addition
Name: COLLIER, DARYL
Address: 550 NE 25TH AVE.
City-St-Zip: OCALA, FL 34471

Title: CD (X) Change ( ) Addition
Name: ADAMS, RUS
Address: 2265 MILL CREEK CIRCLE
City-St-Zip: OCALA, FL 34471

Title: TD (X) Change ( ) Addition
Name: RAMSAMMY, JILLIAN
Address: 1501 W. SILVER SPRINGS BLVD.
City-St-Zip: OCALA, FL 34475

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: NANCY C. LEDDING EX D 04/18/2008
Electronic Signature of Signing Officer or Director Date