

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000005316

FILED  
May 02, 2012  
Secretary of State

**Entity Name:** PANACEA WATERFRONTS FLORIDA PARTNERSHIP, INC.

**Current Principal Place of Business:**

2289 SURF RD. C-1  
PANACEA, FL 32346

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 212  
PANACEA, FL 32346

**New Mailing Address:**

**FEI Number:** 14-1922902

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

KILLEEN, PAIGE  
515 N. ADAMS ST.  
TALLAHASSEE, FL 323011111 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

**OFFICERS AND DIRECTORS:**

Title: C  
Name: DICKSON, WALT  
Address: P.O. BOX 212  
City-St-Zip: PANACEA, FL 32346

Title: VCH  
Name: MILLER, SHERRIE  
Address: P. O. BOX 212  
City-St-Zip: PANACEA, FL 32346

Title: T  
Name: KILLEEN, PAIGE  
Address: P. O. BOX 212  
City-St-Zip: PANACEA, FL 32346

Title: D  
Name: MITCHELL, MARK  
Address: P. O. BOX 212  
City-St-Zip: PANACEA, FL 32346

Title: S  
Name: GARDNER, BARBARA  
Address: PO BOX 212  
City-St-Zip: PANACEA, FL 32346

I hereby 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 all other like empowered.

SIGNATURE: WALT DICKSON

C

05/02/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date