


2005 FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Apr 15, 2005 8:00 am
Secretary of State

04-15-2005 90096 023 ***150.00

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|---|---|---|--|
| DOCUMENT # P03000057183 | |  | |
| 1. Entity Name THE PANACEA GROUP, INC. | | | |
| Principal Place of Business 4532 W KENNEDY BLVD #165 TAMPA FL 33609 | | Mailing Address 4532 W KENNEDY BLVD #165 TAMPA FL 33609 | |
| 2. Principal Place of Business 405 Central Ave. | | 3. Mailing Address 405 Central Ave. | |
| Suite, Apt. #, etc. #450 | | Suite, Apt. #, etc. #450 | |
| City & State St. Petersburg, FL. | | City & State St. Petersburg, FL. | |
| Zip 33701 | Country USA | Zip 33701 | Country USA |
| 6. Name and Address of Current Registered Agent HEITMAN, STAN 221 9TH AVENUE NORTH #A ST PETERSBURG FL 33701 | | 7. Name and Address of New Registered Agent Name Stan Heitman Street Address (P.O. Box Number is Not Acceptable) 405 Central Ave. #450 City St. Petersburg FL Zip Code 33701 | |
| 8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE <u>Stan Heitman</u> <u>Stan Heit</u> <u>3-9-05</u> <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE</small> | | | |
| FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee Will Be \$550.00 Make Check Payable to Florida Department of State | | 9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees | |
| 10. OFFICERS AND DIRECTORS | | 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | D HEITMAN, STAN 4532 W KENNEDY BLVD #165 TAMPA FL 33609 <input type="checkbox"/> Delete | TITLE NAME STREET ADDRESS CITY-ST-ZIP | D Stan Heitman, Stan 405 Central Ave. #450 St. Petersburg, FL. 33701 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | D HEITMAN, CINDY 4532 W KENNEDY BLVD #165 TAMPA FL 33609 <input type="checkbox"/> Delete | TITLE NAME STREET ADDRESS CITY-ST-ZIP | D Heitman, Cindy 405 Central Ave. #450 St. Petersburg, FL. 33701 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | <input type="checkbox"/> Delete | TITLE NAME STREET ADDRESS CITY-ST-ZIP | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
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| TITLE NAME STREET ADDRESS CITY-ST-ZIP | <input type="checkbox"/> Delete | TITLE NAME STREET ADDRESS CITY-ST-ZIP | <input type="checkbox"/> Change <input type="checkbox"/> Addition |

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Stan Heitman Stan Heit 3-9-05 727-824-2834
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

ATTACHMENT

20033978

P03000057123

New address -

405 Central Ave.

#450

St. Petersburg, Fl.
33701