2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jun 22, 2005
Secretary of State

DOCUMENT# P97000069292

Entity Name: MARIAN MEDICAL, INC.

Current Principal Place of Business:

PO BOX 5193
DESTIN, FL 32540

New Principal Place of Business:

4475 LEGENDARY DRIVE
DESTIN, FL 32541

Current Mailing Address:

PO BOX 5193
DESTIN, FL 32540

New Mailing Address:

4475 LEGENDARY DRIVE
DESTIN, FL 32541

FEI Number: 59-3471180 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

MATTHEWS, DANA C
4475 LEGENDARY DR.
DESTIN, FL 32541 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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: DPST ( ) Delete
Name: WINKLER, SANDRA
Address: P.O BOX 5193
City-St-Zip: DESTIN, FL 32540

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DPST (X) Change ( ) Addition
Name: WINKLER, SANDRA
Address: 319 WESTPORT DRIVE
City-St-Zip: LOUISVILLE, KY 40207

I hereby certify that the information supplied with this filing does not qualify for the 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 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: SANDRA WINKLER DPST 06/22/2005

Electronic Signature of Signing Officer or Director Date