

**2009 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P98000035323

**FILED  
Feb 16, 2009  
Secretary of State**

**Entity Name:** MISS MARION OF PANACEA, INC.

**Current Principal Place of Business:**

15 ELBERTA COURT  
PANACEA, FL 32346

**New Principal Place of Business:**

**Current Mailing Address:**

P O BOX 483  
PANACEA, FL 32346

**New Mailing Address:**

**FEI Number:** 59-3512914      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

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

METCALF, MARION R  
15 ELBERTA COURT  
PANACEA, FL 32346      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

**Election Campaign Financing Trust Fund Contribution ( ).**

**OFFICERS AND DIRECTORS:**

Title: PVD ( ) Delete  
Name: METCALF, DANNY  
Address: 15 ELBERTA COURT  
City-St-Zip: PANACEA, FL 32346

Title: STD ( ) Delete  
Name: METCALF, MARION  
Address: 15 ELBERTA COURT  
City-St-Zip: PANACEA, FL 32346

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

Title: ( ) Change ( ) Addition  
Name:  
Address:  
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: MARION METCALF

STD

02/16/2009

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date