2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 24, 2006
Secretary of State

DOCUMENT# P99000089893

Entity Name: MARION SANITATION SERVICES, INC.

Current Principal Place of Business:

418 CYPRESS ROAD
OCALA, FL 34472

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 6943
OCALA, FL 34478

New Mailing Address:

FEI Number: 59-3601739 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

FULLER, JOSEPH W
10426 SW 64TH COURT
OCALA, FL 34476 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: PS ( ) Delete
Name: WALKER, JAMES
Address: 16 PECAN RUN LN.
City-St-Zip: OCALA, FL 34472

Title: VPT ( ) Delete
Name: CUMMINGS, DONALD
Address: 10426 SW 64TH COURT
City-St-Zip: OCALA, FL 34476

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 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: DONALD L. CUMMINGS VP 04/24/2006

Electronic Signature of Signing Officer or Director Date