


2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jul 28, 2008 8:00 am
Secretary of State

07-28-2008 90032 003 ****61.25

DOCUMENT # N03000008519 1. Entity Name AN OUNCE OF PREVENTION SAVES, INC.	
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Principal Place of Business 2801 LONG MEADOW DRIVE WELLINGTON, FL 33414 US	Mailing Address 2801 LONG MEADOW DRIVE WELLINGTON, FL 33414 US
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DO NOT WRITE IN THIS SPACE

60045598



07032008 No Chg-NP CR2E037 (4/06)

4. FEI Number 20-0868696	Applied For Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent

SINGER, JERRY H
2801 LONG MEADOW DRIVE
WELLINGTON, FL 33414

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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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

Filing Fee is \$61.25
Due by September 12, 2008

9. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P SINGER, HOWARD M 2801 LONG MEADOW DRIVE WELLINGTON, FL 33414
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP HARMON, ALFRED 2801 LONG MEADOW DRIVE WELLINGTON, FL 33414
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SEC SINGER, JERRY H 2801 LONG MEADOW DRIVE WELLINGTON, FL 33414
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	

DO NOT WRITE IN THIS SPACE

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Jerry SINGER **JERRY SINGER** 7/6/08 561-793-6666
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #