2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Aug 08, 2008
Secretary of State

DOCUMENT# N03000010167

Entity Name: CONSERVE ALL WAYS, INC

Current Principal Place of Business:

108 W. COMMERCIAL ST
SANFORD, FL 32771

New Principal Place of Business:

1740 BRUMLEY ROAD
CHULUOTA, FL 32766

Current Mailing Address:

108 W. COMMERCIAL ST
SANFORD, FL 32771

New Mailing Address:

P.O. BOX 180834
CASSELBERRY, FL 32718

FEI Number: 20-0731562 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

BARR, MICHAEL
1003 LEEDS CT
WINTER PARK, FL 32792 US

Name and Address of New Registered Agent:

SCHAFER, DEBORAH A
1740 BRUMLEY ROAD
CHULUOTA, FL 32766 US

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: SAVEFLORIDANOW@YAHOO.COM 08/08/2008
Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: S ( ) Delete
Name: BARR, MICHAEL
Address: 1003 LEEDS CT
City-St-Zip: WINTER PARK, FL 32792

Title: C ( ) Delete
Name: DORWORTH, CHRIS
Address: 150 WHISTABLE CT
City-St-Zip: LAKE MARY, FL 32746

Title: S ( ) Delete
Name: BRODEUR, TIMOTHY
Address: 684 VISTAWILLA DRIVE
City-St-Zip: WINTER SPRINGS, FL 32708

Title: T ( ) Delete
Name: BAUER, JEFFERY
Address: 1138 POINT TERRACE #202
City-St-Zip: CASSELBERRY, FL 32707

Title: D (X) Delete
Name: DECIRYAN, DANNY
Address: 1581 SILK TREE CIR
City-St-Zip: SANFORD, FL 32773

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: S (X) Change ( ) Addition
Name: BARNES, STEVE
Address: 400W CRYSTAL DR
City-St-Zip: SANFORD, FL 32773

Title: S (X) Change ( ) Addition
Name: BUNKER, ALEX
Address: 868 LITTLE RIVER BEND RD
City-St-Zip: ALTAMONTE SPRINGS, FL 32714

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

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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: DEBORAH SCHAFER C 08/08/2008
Electronic Signature of Signing Officer or Director Date