2005 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT # N97000004756

1. Entity Name
THE PRESERVATION STATION, INC.

FILED
05 FEB 25 PM 12:52
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business	Mailing Address
28531 BENNINGTON DRIVE ZEPHYRHILLS, FL 33544	28531 BENNINGTON DRIVE WESLEY CHAPEL, FL 33544

02152005 REIN-NP CR2E099 (6/04)

2. Principal Place of Business	3. Mailing Address
16801 Morris Bridge Rd Suite, Apt. #, etc.	16801 Morris Bridge Rd Suite, Apt. #, etc.
City & State: Thonotosassa FL	City & State: Thonotosassa, FL
Zip: 33592 Country: Hillsborough	Zip: 33592 Country: Hillsborough

4. FEI Number: 59-3500232 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☒ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
ARONOFF, SUSAN E 28531 BENNINGTON DRIVE WESLEY CHAPEL, FL 33544	Name: SUSAN ARONOFF Street Address (P.O. Box Number is Not Acceptable): 16801 Moms Bridge Rd City: Thonotosassa FL Zip Code: 33592

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: Susan E. Aronoff 2/16/05
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW!!! FEE IS $122.50 131.25

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Make check payable to Florida Department of State

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D, P ARONOFF, SUSAN E 28531 BENNINGTON DRIVE WESLEY CHAPEL, FL 33544	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☒ Addition I, S Angela Wood 16581 Moms Bridge Rd Thonotosassa, FL 33592
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	T BAGBY, SHEILA 1313 FLEXFORD ST. BRANDON, FL 33511	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☒ Addition VP Peg Gilley 7320 Pop Drive Wesley Chapel, FL 33544
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VP HOLT, PATTI 2991 24TH AVENUE NE NAPLES, FL 34120	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☒ Change ☐ Addition D Patti Holt 2991-24th Ave NE Naples, FL 34120
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D REAM, JENNIFER PO BOX 21 WADDELL, AZ 85355	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition 800047923808 03/08/05--01016--002 **131.25
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify 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 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: Susan E. Aronoff 2/16/05 813-690-9696
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #