

2021 FLORIDA NOT FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N03000010167

Entity Name: CONSERVE ALL WAYS, INC**Current Principal Place of Business:**940 DOUGLAS AVE
UNIT 122
ALTAMONTE SPRINGS, FL 32714**Current Mailing Address:**P.O. BOX 181774
CASSELBERRY, FL 32718 US**FEI Number:** 20-0731562**Certificate of Status Desired:** Yes**Name and Address of Current Registered Agent:**YOUNG, EDMUND
940 DOUGLAS AVENUE
#122
ALTAMONTE SPRINGS, FL 32714 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:** EDMUND H. YOUNG**11/10/2021**

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title	GROUP 1 SUPERVISOR
Name	KIRBY, JASON
Address	P.O. BOX 181774
City-State-Zip:	CASSELBERRY FL 32718

Title	GROUP 2 SUPERVISOR
Name	WEB, JENNIFER
Address	P.O. BOX 181774
City-State-Zip:	CASSELBERRY FL 32718

Title	GROUP 3 SUPERVISOR
Name	HALL, SARAH
Address	P.O. BOX 181774
City-State-Zip:	CASSELBERRY FL 32718

Title	GROUP 4 SUPERVISOR
Name	YOUNG, ED
Address	P.O. BOX 181774
City-State-Zip:	CASSELBERRY FL 32718

Title	GROUP 5 SUPERVISOR
Name	HERIOT, KAREN
Address	P. O. BOX 181774
City-State-Zip:	CASSELBERRY FL 32718

I hereby 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 all other like empowered.

SIGNATURE: KAREN HERIOT**GROUP 5 SUPERVISOR****11/10/2021**

Electronic Signature of Signing Officer/Director Detail

Date