2009 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 02, 2009
Secretary of State

DOCUMENT# H86225

Entity Name: SUWANNEE SALVAGE, INC.

Current Principal Place of Business:

13396 76TH STREET
LIVE OAK, FL 32060 US

New Principal Place of Business:

Current Mailing Address:

13396 76 ST.
LIVE OAK, FL 32060 US

New Mailing Address:

FEI Number: 59-2606754 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

LEWIS, BRADFORD C.
14544 96TH PLACE
LIVE OAK, FL 32060 US

Name and Address of New Registered Agent:

LEWIS, BRADFORD C.
5171 WIDEFIELD DR
TALLAHASSEE, FL 32309 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: 02/02/2009
Electronic Signature of Registered Agent — Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: P ( ) Delete
Name: LEWIS, LEROY D., SR.,
Address: 12632 US 129 SOUTH
City-St-Zip: LIVE OAK, FL

Title: V ( ) Delete
Name: LEWIS, LAURENCE LEE,
Address: 12654 US 129 SOUTH
City-St-Zip: LIVE OAK, FL

Title: V (X) Delete
Name: LEWIS, LEROY D., JR.,
Address: 10843 SR 51 SOUTH
City-St-Zip: LIVE OAK, FL

Title: ST ( ) Delete
Name: LEWIS, BRADFORD C.,
Address: 14544 96TH PLACE
City-St-Zip: LIVE OAK, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition
Name: LEWIS, LEROY D., JR,
Address: 10843 SR 51 SOUTH
City-St-Zip: LIVE OAK, FL 32060 US

Title: V (X) Change ( ) Addition
Name: LEWIS, LAURENCE LEE,
Address: 12654 US 129 SOUTH
City-St-Zip: LIVE OAK, FL 32060 US

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

Title: ST (X) Change ( ) Addition
Name: LEWIS, BRADFORD C.,
Address: 5171 WIDEFIELD DR
City-St-Zip: TALLAHASSEE, FL 32309 US

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

SIGNATURE: BRADFORD C LEWIS ST 02/02/2009
Electronic Signature of Signing Officer or Director — Date