2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 09, 2009
Secretary of State

DOCUMENT# N00000006082

Entity Name: ENTERPRISE PRESERVATION SOCIETY, INC.

Current Principal Place of Business:

440 NORTH ROAD
ENTERPRISE, FL 32725

New Principal Place of Business:

Current Mailing Address:

PO BOX 4015
ENTERPRISE, FL 32725

New Mailing Address:

FEI Number: 59-3674061 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

MATZINGER, MARK A
440 NORTH ROAD
ENTERPRISES, FL 32725 US

Name and Address of New Registered Agent:

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: _____
Electronic Signature of Registered Agent — Date

OFFICERS AND DIRECTORS:

Title:	D	( ) Delete
Name:	MATZINGER, MARK A	
Address:	440 N ROAD	
City-St-Zip:	DELTONA, FL 32725	
Title:	CD	( ) Delete
Name:	FINN, KEVIN	
Address:	107 CLAYMORE STREET	
City-St-Zip:	DELTONA, FL 32725	
Title:	D	( ) Delete
Name:	TITUS, MARVIN S	
Address:	1557 BARKER DRIVE	
City-St-Zip:	ENTERPRISE, FL 32725	
Title:	D	( ) Delete
Name:	FLOWERS, JOAN	
Address:	1554 ARROWHEAD TRAIL	
City-St-Zip:	ENTERPRISE, FL 32725	
Title:	D	( ) Delete
Name:	SULLIVAN, ED	
Address:	165 OAKLEA DR	
City-St-Zip:	DELTONA, FL 32725	
Title:	D	( ) Delete
Name:	AYMAR, CAROL	
Address:	1328 SIOUX TRAIL	
City-St-Zip:	ENTERPRISE, FL 32725	

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:	D	(X) Change ( ) Addition
Name:	TITUS, VERNA B	
Address:	1557 BARKER DRIVE	
City-St-Zip:	ENTERPRISE, FL 32725	
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: MARVIN S. TITUS D 01/09/2009
Electronic Signature of Signing Officer or Director — Date