## 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N09000005921

Apr 29, 2010 Secretary of State

Entity Name: RECOVERYWERKS INC.

**Current Principal Place of Business: New Principal Place of Business:** 

1224 NE OSCEOLA AVE. 5401 E. SILVER SPRINGS BLVD OCALA, FL 34470

17

SILVER SPRINGS, FL 34488

**Current Mailing Address: New Mailing Address:** 

1224 NE OSCEOLA AVE. 5401 E. SILVER SPRINGS BLVD OCALA, FL 34470

SILVER SPRINGS, FL 34488

FEI Number: 27-0311901 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

THOMAS, DAVID H 5401 E SILVER SPRINGS BLVD LOT # 17 SILVER SPRINGS, FL 34488 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:

Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

THOMAS, DAVID H Name:

Address: 5401 E. SILVER SPRINGS BLVD. LOT 17

City-St-Zip: SILVER SPRINGS, FL 34488

Title:

Name: DRAKE, DENNIS Address: 3145 NW 60TH STREET City-St-Zip: OCALA, FL 34475

Title:

FITZPATRICK, MICHAEL T Name:

Address: 2401 NE 19 AVE. City-St-Zip: OCALA, FL 34470

Title: Μ

Name: DAGGETT, TOD

Address: 3909 NE 22ND STREET City-St-Zip: OCALA, FL 34470

Title:

KUNTZ, JEREMY Name: 4890 SW 45TH STREET Address: City-St-Zip: OCALA, FL 34474

Title:

SPAULDING, TIMOTHY V Name: Address: 528 NE 40TH TERRACE OCALA, FL 34470 City-St-Zip:

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.

**PRES** SIGNATURE: DAVID H. THOMAS 04/29/2010