

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N93000002722

FILED
Apr 28, 2008
Secretary of State

Entity Name: SALVARE, INC.

Current Principal Place of Business:

14540 CORTEZ BLVD
SUITE 202
BROOKSVILLE, FL 34613 US

New Principal Place of Business:

Current Mailing Address:

PO BOX 6179
SPRING HILL, FL 34611 US

New Mailing Address:

FEI Number: 59-3188546

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

JOHNSTON, DARRYL
29 S. BROOKSVILLE AVE.
BROOKSVILLE, FL 34601 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: T () Delete
Name: ARCHBOLD, ALAN
Address: P.O. BOX 37
City-St-Zip: BROOKSVILLE, FL 34605

Title: VP () Delete
Name: NUGENT, RICHARD
Address: 1890 CORTEZ BLVD
City-St-Zip: BROOKSVILLE, FL 34601

Title: PD () Delete
Name: ROBINSON, HANNAH N
Address: 20 N MAIN STREET RM 460
City-St-Zip: BROOKSVILLE, FL 34601

Title: S () Delete
Name: JENNINGS, ELIZABETH
Address: 1046 QUALITY DRIVE
City-St-Zip: SPRING HILL, FL 34609

Title: D () Delete
Name: ANDREWS, DEBORAH
Address: PO BOX 6071
City-St-Zip: SPRING HILL, FL 34611

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: () 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: DEBORAH A ANDREWS

ED

04/28/2008

Electronic Signature of Signing Officer or Director

Date