

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# N97000004756

FILED
Apr 30, 2002 8:00 AM
Secretary of State

Entity Name: THE PRESERVATION STATION, INC.

Current Principal Place of Business:

28531 BENNINGTON DRIVE
ZEPHYRHILLS, FL 33544

New Principal Place of Business:

Current Mailing Address:

4001 CYPRESS LANE
TAMPA, FL 33624

New Mailing Address:

28531 BENNINGTON DRIVE
WESLEY CHAPEL, FL 33544

FEI Number: 59-3500232

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ARONOFF, SUSAN E
4001 CYPRESS LANE
TAMPA, FL 33624 US

Name and Address of New Registered Agent:

ARONOFF, SUSAN E
28531 BENNINGTON DRIVE
WESLEY CHAPEL, FL 33544 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: _____

04/30/2002

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D, P () Delete
Name: ARONOFF, SUSAN E
Address: 4001 CYPRESS LANE
City-St-Zip: TAMPA, FL 33624

Title: VP () Delete
Name: DRAKE, DEBRA DVM
Address: 15519 WOODWAY DRIVE
City-St-Zip: TAMPA, FL 33613

Title: T () Delete
Name: SMITH, ALAN
Address: 15519 WOODWAY DRIVE
City-St-Zip: TAMPA, FL 33613

Title: D () Delete
Name: HOLT, PATTI
Address: 2991 24TH AVENUE NE
City-St-Zip: NAPLES, FL 34120

Title: D () Delete
Name: REAM, JENNIFER
Address: PO BOX 21
City-St-Zip: WADDELL, AZ 85355

Title: S () Delete
Name: CANNELLA, STEVE
Address: 14822 DAISY LANE
City-St-Zip: TAMPA, FL 33613

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D, P (X) Change () Addition
Name: ARONOFF, SUSAN E
Address: 28531 BENNINGTON DRIVE
City-St-Zip: WESLEY CHAPEL, FL 33544

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 for the exemption stated in Section 119.07(3)(i), 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: SUSAN E. ARONOFF

D,P

04/30/2002

Electronic Signature of Signing Officer or Director

Date