

# 2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# N97000004756

FILED  
May 03, 2003  
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:**

28531 BENNINGTON DRIVE  
WESLEY CHAPEL, FL 33544

**New Mailing Address:**

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  
28531 BENNINGTON DRIVE  
WESLEY CHAPEL, FL 33544      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, P      ( ) Delete  
Name: ARONOFF, SUSAN E  
Address: 28531 BENNINGTON DRIVE  
City-St-Zip: WESLEY CHAPEL, FL 33544

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

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

Title: T      (X) Change ( ) Addition  
Name: BAGBY, SHEILA  
Address: 1313 FLEXFORD ST.  
City-St-Zip: BRANDON, FL 33511

Title: VP      (X) Change ( ) Addition  
Name: HOLT, PATTI  
Address: 2991 24TH AVENUE NE  
City-St-Zip: NAPLES, FL 34120

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

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

P

05/03/2003

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date