

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N99000005313

FILED
Apr 09, 2009
Secretary of State

Entity Name: THE PRESERVE, INC.

Current Principal Place of Business:

3687 NW 16TH BLVD
GAINESVILLE, FL 32605

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 357116
GAINESVILLE, FL 32635

New Mailing Address:

FEI Number: 59-3658304

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

GREENE, ANTHONY
7320 NW 47TH CT
GAINESVILLE, FL 32606 US

Name and Address of New Registered Agent:

JONES, MAXINE E
1442 NE 20TH AVE.
GAINESVILLE, FL 32609 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: MAXINE E. JONES

04/09/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: EARLY, MAXINE
Address: P.O. BOX 5433
City-St-Zip: GAINESVILLE, FL 32627

Title: D () Delete
Name: MONAHAN, GAIL
Address: 703 N.E. 1ST STREET
City-St-Zip: GAINESVILLE, FL 32601

Title: D () Delete
Name: MCARTHUR, SHELTON
Address: 2936 N.E. 19TH DRIVE, #C
City-St-Zip: GAINESVILLE, FL 32602

Title: D () Delete
Name: JONES, TONY
Address: 721 N.W. 6TH STREET
City-St-Zip: GAINESVILLE, FL 32601

Title: D () Delete
Name: MASON, TOM
Address: 3000 NW 83RD ST
City-St-Zip: GAINESVILLE, FL 32606

Title: D () Delete
Name: CAMPBELL, GUSSIE
Address: 3531 N.W. 41ST TERR.
City-St-Zip: GAINESVILLE, FL 32606

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: VP (X) Change () Addition
Name: JONES, TONY
Address: 721 NW 6TH STREET
City-St-Zip: GAINESVILLE, FL 32601

Title: T (X) Change () Addition
Name: DIXON, GLENN
Address: 3644 NW 12TH AVE
City-St-Zip: GAINESVILLE, FL 32605

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

Title: D (X) Change () Addition
Name: GREEN, NORMA
Address: 1012 NW 42ND DRIVE
City-St-Zip: GAINESVILLE, FL 32605

Title: D (X) Change () Addition
Name: COLVERSON, KATHY
Address: 3202 SE 29 LANE
City-St-Zip: GAINESVILLE, FL 326416

Title: D (X) Change () Addition
Name: THOMPSON, ALLISON
Address: 901 NW 8TH AVENUE
City-St-Zip: GAINESVILLE, FL 32601

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: NORMA GREEN

D

04/09/2009

Electronic Signature of Signing Officer or Director

Date