

# 2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N99000005313

FILED  
Apr 28, 2011  
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:

3687 NW 16TH BLVD  
GAINESVILLE, FL 32605 US

## Current Mailing Address:

P.O. BOX 357116  
GAINESVILLE, FL 32635

## New Mailing Address:

P.O. BOX 357116  
GAINESVILLE, FL 32635 US

FEI Number: 59-3658304

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

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

## Name and Address of New Registered Agent:

JONES, MAXINE E MRS  
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 JONES

04/28/2011

Electronic Signature of Registered Agent

Date

## OFFICERS AND DIRECTORS:

Title: P  
Name: GREEN, NORMA MRS  
Address: 1012 NW 42 DRIVE  
City-St-Zip: GAINESVILLE, FL 32605 US

Title: T  
Name: DICKSON, GLENN DR  
Address: 3644 NW 12TH AVE  
City-St-Zip: GAINESVILLE, FL 32605 US

Title: S  
Name: COLVERSON, KATHY DR  
Address: 3202 SE 29 LANE  
City-St-Zip: GAINESVILLE, FL 32641 US

Title: D  
Name: WILLIAMS, GEORGE  
Address: 3938 NW 62 LANE  
City-St-Zip: GAINESVILLE, FL 32653 US

Title: D  
Name: MUTCH, SAM PA  
Address: 324 NW 29 STREET  
City-St-Zip: GAINESVILLE, FL 32607 US

Title: D  
Name: EASTERLING, PAMELA MRS  
Address: P O BOX 1173  
City-St-Zip: MELROSE, FL 32666 US

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.

SIGNATURE: DR GLENN W DICKSON

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04/28/2011

Electronic Signature of Signing Officer or Director

Date