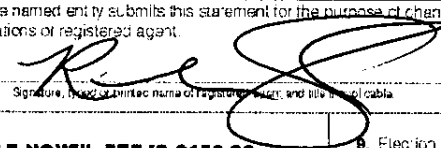
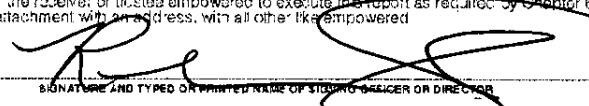


**2004 FOR PROFIT CORPORATION
ANNUAL REPORT****FILED**
Apr 19, 2004 8:00 am
Secretary of State

04-19-2004 90330 013 ***150.00

DOCUMENT # P03000020548			
1. Entity Name SLM PRESERVATIONIST, INC.			
Principal Place of Business 1870 STARKEY ROAD SUITE 3 LARGO, FL 33771		Mailing Address 1870 STARKEY ROAD SUITE 3 LARGO, FL 33771	
2. Principal Place of Business Suite, Apt. #, etc.		3. Mailing Address 231 myrtle Ct. Suite, Apt. #, etc.	
City & State Palm Harbor, FL		City & State Palm Harbor, FL	
Zip 34683	Country Pinellas	4. FE Number 74-3085369	
5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required		Applied For ☐ No Applicable	
6. Name and Address of Current Registered Agent SPIEGEL & UTRERA, P.A. 1840 SW 22ND ST. 4TH FLOOR MIAMI, FL 33145		7. Name and Address of New Registered Agent Name Repha + Jennings, P.A. Street Address (P.O. Box Number is Not Acceptable) 703 COURT ST. City Clearwater, FL Zip Code 33756	
8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE  Attorney's office 4/16/04 Signature, typed or printed name of registered agent, and title (if applicable) (NOTE: Registered Agent signature required when reinstating)			
FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution ☐ \$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN '04	
TITLE PTD ☐ Delete NAME MCKENZIE, PHILIP W STREET ADDRESS 1870 STARKEY ROAD SUITE 3 CITY-STATE-ZIP LARGO, FL 33771		TITLE ☐ Change ☐ Addition NAME STREET ADDRESS CITY-STATE-ZIP	
TITLE VSD ☐ Delete NAME FARRELL, RENEE M STREET ADDRESS 1870 STARKEY ROAD SUITE 3 CITY-STATE-ZIP LARGO, FL 33771		TITLE ☐ Change ☐ Addition NAME STREET ADDRESS CITY-STATE-ZIP	
TITLE ☐ Delete NAME STREET ADDRESS CITY-STATE-ZIP		TITLE ☐ Change ☐ Addition NAME STREET ADDRESS CITY-STATE-ZIP	
TITLE ☐ Delete NAME STREET ADDRESS CITY-STATE-ZIP		TITLE ☐ Change ☐ Addition NAME STREET ADDRESS CITY-STATE-ZIP	
TITLE ☐ Delete NAME STREET ADDRESS CITY-STATE-ZIP		TITLE ☐ Change ☐ Addition NAME STREET ADDRESS CITY-STATE-ZIP	
TITLE ☐ Delete NAME STREET ADDRESS CITY-STATE-ZIP		TITLE ☐ Change ☐ Addition NAME STREET ADDRESS CITY-STATE-ZIP	
12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 the report as required by Section 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.			
SIGNATURE:  SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		4/16/04 (727) 776-3231 Date Daytime Phone #	

24046000



04152004 Chg-P CR2E034 (10/03)

Attachment
24046988
P03000020548
REPKA & JENNINGS, P.A.

ATTORNEYS AND COUNSELORS AT LAW

703 Court Street, Clearwater, Florida 33756-5507
Phone: (703) 441-4550 Fax: (727) 461-2919

To: Rene Farrell	Fax Number: 5846274
Company :	Date : 4/15/2004
From : Thomas C. Jennings III	Fax Number : 727 461 2919
Company : REPKA & JENNINGS, P.A.	Pages including cover page: 3
Subject : Annual Report for SLM Preservationist	

Message:

The State would have sent to the Starkey address a postcard telling you to download this form.

Be sure you put in the FEIN and make any changes or corrections you see fit.