2009 FOR PROFIT CORPORATION REINSTATEMENT

FILED
Apr 30, 2009
Secretary of State

DOCUMENT# P07000006437

Entity Name: LIFE PRESERVER MORTGAGE INC

Current Principal Place of Business:

5751 NW BELLWOOD CIR
PORT ST LUCIE, FL 34986

New Principal Place of Business:

5811 NW BLUE BONNET COURT
PORT ST LUCIE, FL 34986

Current Mailing Address:

5751 NW BELLWOOD CIR
PORT ST LUCIE, FL 34986

New Mailing Address:

5811 NW BLUE BONNET COURT
PORT ST LUCIE, FL 34986

FEI Number: 20-8242952 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

ALTINO, ROBERT
5751 NW BELLWOOD CIRCLE
PORT ST LUCIE, FL 34986 US

Name and Address of New Registered Agent:

ALTINO, ROBERT
5811 NW BLUE BONNET COURT
PORT ST LUCIE, FL 34986 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: ROBERT ALTINO 04/30/2009
Electronic Signature of Registered Agent Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: P ( ) Delete
Name: ALTINO, ROBERT
Address: 5751 NW BELLWOOD CIRCLE
City-St-Zip: PORT ST LUCIE, FL 34986

Title: V (X) Delete
Name: ALTINO, DAWN
Address: 5751 NW BELLWOOD CIRCLE
City-St-Zip: PORT ST LUCIE, FL 34986

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition
Name: ALTINO, ROBERT
Address: 5811 NW BLUE BONNET COURT
City-St-Zip: PORT ST LUCIE, FL 34986

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

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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ROBERT ALTINO P 04/30/2009
Electronic Signature of Signing Officer or Director Date