

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000003055

Entity Name: RECOVER, INC.

FILED
Mar 03, 2009
Secretary of State

Current Principal Place of Business:

477 SOUTH ROSEMARY AVE.
SUITE 323
WEST PALM BEACH, FL 33401 US

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 3011
WEST PALM BEACH, FL 33402 US

New Mailing Address:

FEI Number: 26-1708686

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SAVRANN, RICHARD A
477 SOUTH ROSEMARY AVE.
SUITE 323
WEST PALM BEACH, FL 33401 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: SAIGER, PETER W
Address: 12316 RIVERFALLS CT.
City-St-Zip: BOCA RATON, FL 33428 US

Title: TREA () Delete
Name: SAIGER, PETER W
Address: 12316 RIVERFALLS CT.
City-St-Zip: BOCA RATON, FL 33428 US

Title: SEC () Delete
Name: SAVARESE, RUSTIN
Address: 1012 LA SALINAS CIRCLE
City-St-Zip: BOCA RATON, FL 33428 US

Title: DIR () Delete
Name: SAIGER, PETER W
Address: 12316 RIVERFALLS CT.
City-St-Zip: BOCA RATON, FL 33428 US

Title: DIR () Delete
Name: SAVARESE, RUSTIN
Address: 1012 LA SALINAS CIRCLE
City-St-Zip: BOCA RATON, FL 33428 US

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

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

Title: DIR () Change (X) Addition
Name: SRIBERG, ROBERT M
Address: 13511 TOUCHSTONE PLACE
City-St-Zip: PALM BEACH GARDENS, FL 33418 US

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: PETER W. SAIGER

P

03/03/2009

Electronic Signature of Signing Officer or Director

Date