2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000090876

Entity Name: TREFOIL PRESERVATION, INC

FILED Apr 27, 2009 Secretary of State

Current Principal Place of Business:			New Principal P	New Principal Place of Business:	
101 LANTE DELAND, F	RN LANE		·		
Current Mailing Address:			New Mailing Add	New Mailing Address:	
P O BOX 40 ENTERPRI	040 SE, FL 32725	US			
FEI Number:	26-3481396	FEI Number Applied For ()	FEI Number Not Applicable () Certificate of Status Desired ()	
Name and Address of Current Registered Agent:			Name and Addre	Name and Address of New Registered Agent:	
PHILLIPPS, MICHAEL B 101 LANTERN LANES DELAND, FL 32720 US			101 LANTERN LA	PHILLIPPS, MICHAEL B 101 LANTERN LANE DELAND, FL 32720 US	
The above in the State	named entity si of Florida.	ubmits this statement for the pur	pose of changing its regis	stered office or registered agent, or both,	
SIGNATURE:				04/27/2009	
	Electroni	Signature of Registered Agent		Date	
Election Cam	paign Financing	Trust Fund Contribution ().			
OFFICERS AND DIRECTORS:			ADDITIONS/CHA	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	P () I BRIDGES, GING P O BOX 4040 ENTERPRISE, F		Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	VP () I ANDREWS, ASH 1501 TEDFORD EUSTIS,, FL 32	STREET	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	VP () I PHILLIPPS, WHI 101 LANTERN LA DELAND, FL 32	ANE	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	T () I PHILLIPS, MICH. 101 LANTERN LA DELAND, FL 32	AEL ANE	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	S () I ANDREWS, TIM 1501 TEDFORD EUSTIS, FL 327		Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	O () I BRIDGES, ROY 2575 ENTERPRI ENTERPRISE, F	SE OSTEEN RD.	Title: Name: Address: City-St-Zip:	() Change () Addition	

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: GINGER F BRIDGES P 04/27/2009