2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P34040

FILED Mar 20, 2009 Secretary of State

Entity Name: PREMIUM PRESERVER ORGANIZATION, INC.

Current Principal Place of Business: New Principal Place of Business:

36 WEST TROPIC BLVD SUITE C LARGO, FL 33770 US

Current Mailing Address: New Mailing Address:

PO BOX 866

LARGO, FL 33779 US

FEI Number: 31-1308333 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

COTTERMAN, CRAIG M
960 STARKEY ROAD #1104
LARGO, FL 33771 US

COTTERMAN, CRAIG M
1348 HIGH BLUFF DRIVE WEST
LARGO, FL 33770 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: 03/20/2009

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

 Title:
 PRES
 () Delete
 Title:
 PRES
 (X) Change () Addition

 Name:
 COTTERMAN,, CRAIG M
 Name:
 COTTERMAN,, CRAIG M

 Address:
 PO BOX 866
 Address:
 1348 HIGH BLUFF DRIVE WEST

City-St-Zip: LARGO, FL 33779 City-St-Zip: LARGO, FL 33770

Title: SEC () Delete Title: () Change () Addition

 Name:
 CHABER, STACY N
 Name:

 Address:
 13530 WILCOX ROAD
 Address:

 City-St-Zip:
 LARGO, FL 33774
 City-St-Zip:

Title: VP () Delete Title: VP (X) Change () Addition
Name: COTTERMAN, CAROLYN L
Address: PO BOX 866 Address: 1348 HIGH BLUFF DRIVE WEST

City-St-Zip: LARGO, FL 33779 City-St-Zip: LARGO, FL 33770

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: /CRAIG M COTTERMAN/ PD 03/20/2009