

2008 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P93000065372

FILED
Oct 31, 2008
Secretary of State**Entity Name:** PRESSON, INC.**Current Principal Place of Business:**10 E FAIRFIELD DR
STE A
PENSACOLA, FL 32501**New Principal Place of Business:****Current Mailing Address:**10 E FAIRFIELD DR
STE A
PENSACOLA, FL 32501**New Mailing Address:****FEI Number:** 59-3202555**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**WEANER, RITA H
3035 OAK POINTE DR
PENSACOLA, FL 32505 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

OFFICERS AND DIRECTORS:**Title:** PD () Delete
Name: WEANER, RITA H
Address: 3035 OAK POINTE DR
City-St-Zip: PENSACOLA, FL**Title:** VD (X) Delete
Name: WEANER, LOWELL R
Address: 3035 OAK POINTE DR
City-St-Zip: PENSACOLA, FL**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:****Title:** () Change () Addition
Name:
Address:
City-St-Zip:**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: RITA H. WEANER

PD

10/31/2008

Electronic Signature of Signing Officer or Director

Date