

# 2008 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N05000012045

**FILED**  
**Oct 14, 2008**  
**Secretary of State**

**Entity Name:** SAVE THE WORLD FOUNDATION, INC.

**Current Principal Place of Business:**

7702 DAWBERRY CRESCENT  
ORLANDO, FL 32819 US

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 691359  
ORLANDO, FL 32869 US

**New Mailing Address:**

**FEI Number:** 20-3870281

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

HOFMA, EDWARD A  
617 EAST COLONIAL DRIVE  
ORLANDO,, FL 32803 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:** EDWARD HOFMA

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

**Title:** P ( ) Delete  
**Name:** DAVIDOFF, JARROD  
**Address:** P.O. BOX 691359  
**City-St-Zip:** ORLANDO, FL 32869 US

**Title:** TRSR ( ) Delete  
**Name:** VAN RENSBURG, FREDDERICK C  
**Address:** P.O. BOX 691359  
**City-St-Zip:** ORLANDO, FL 32869 US

**Title:** SCRY ( ) Delete  
**Name:** STURM, WILLEM J  
**Address:** P.O. BOX 691359  
**City-St-Zip:** ORLANDO, FL 32869 US

**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:**

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

**SIGNATURE:** JARROD DAVIDOFF

MR

10/14/2008

Electronic Signature of Signing Officer or Director

Date