## 2008 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

## DOCUMENT# N07000006827

Title:

Name:

Address:

City-St-Zip:

Entity Name: TIGER'S WORLD FOUNDATION INC.

FILED Oct 28, 2008 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 1007 6TH STREET SE WINTER HAVEN, FL 33880 **Current Mailing Address: New Mailing Address:** 1007 6TH STREET SE WINTER HAVEN, FL 33880 FEI Number: 14-2004077 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: BERTO, DIEUSEUL 1007 6TH STREET SE WINTER HAVEN, FL 33880 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: DIEUSEUL BERTO Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete (X) Change ( ) Addition BERTO, DIEUSEUL BERTO, DIEUSEUL Name: Name: 1007 6TH STREET SE Address: 1007 6TH STREET SE Address: City-St-Zip: WINTER HAVEN, FL 33880 City-St-Zip: WINTER HAVEN, FL 33880 Title: () Delete Title: () Change () Addition BERTO, EDSON Name: Name: Address: 5607 LAKE FOX CIRCLE Address: City-St-Zip: WINTER HAVEN, FL 33884 City-St-Zip: Title: () Delete Title: () Change () Addition BUTLER, MACY V Name: Name: 806 WARE AVENUE NE Address: Address: City-St-Zip: WINTER HAVEN, FL 33881 City-St-Zip: Title: ( ) Delete Title: () Change () Addition Name: CHERRA, DIEULHOMME Name: Address: 5607 LAKE FOX CIRCLE Address: City-St-Zip: WINTER HAVEN, FL 33884 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.

Title:

Name:

Address:

City-St-Zip:

SIGNATURE: DIEUSEUL BERTO D 10/28/2008

() Delete

BERTO, FRITZ

1007 6TH STREET SE

WINTER HAVEN, FL 33880

() Change () Addition