2008 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT

FILED
May 10, 2008
Secretary of State

DOCUMENT# N00000006906

Entity Name: A NATURES SANCTUARY, INCORPORATED

Current Principal Place of Business:

101425 OVERSEAS HWY
815
KEY LARGO, FL 33037

New Principal Place of Business:

Current Mailing Address:

101425 OVERSEAS HWY
815
KEY LARGO, FL 33037

New Mailing Address:

FEI Number: 65-1035833 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

ALLEN, CLYDE R.
101425 OVERSEAS HWY
815
KEY LARGO, FL 33037 US

Name and Address of New Registered Agent:

ALLEN, CLYDE R
101425 OVERSEAS HWY
815
KEY LARGO, FL 33037 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: CLYDE ALLEN 05/10/2008
Electronic Signature of Registered Agent — Date

OFFICERS AND DIRECTORS:

Title: VD ( ) Delete
Name: LINGUETTA, ALEXANDRE
Address: 101425 OVERSEAS HWY # 815
City-St-Zip: KEY LARGO, FL 33037

Title: TRS ( ) Delete
Name: SMITH, GLEN
Address: 101425 OVERSEAS HWSY 815
City-St-Zip: KEY LARGO, FL 33037

Title: VD ( ) Delete
Name: CHARLES, BEISWANGER
Address: 101425 OVERSEAS HWY # 815
City-St-Zip: KEY LARGO, FL 33037

Title: PCBD ( ) Delete
Name: ALLEN, CLYDE R
Address: 101425 OVERSEAS HWY # 815
City-St-Zip: KEY LARGO, FL 33037

Title: VD (X) Delete
Name: RUSSELL, CASEY
Address: 101425 OVERSEAS HWY # 815
City-St-Zip: KEY LARGO, FL 33037

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: VD (X) Change ( ) Addition
Name: MUSSELMAN, JACK
Address: 101425 OVERSEAS HWSY 815
City-St-Zip: KEY LARGO, FL 33037

Title: VD (X) Change ( ) Addition
Name: MUSSELMAN, CAROL
Address: 101425 OVERSEAS HWY # 815
City-St-Zip: KEY LARGO, FL 33037

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: CLYDE ALLEN PRES 05/10/2008
Electronic Signature of Signing Officer or Director — Date