

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000006906

FILED
Jan 12, 2009
Secretary of State

Entity Name: A NATURES SANCTUARY, INCORPORATED

Current Principal Place of Business:

101425 OVERSEAS HWY
815
KEY LARGO, FL 33037

New Principal Place of Business:

88005 OVERSEAS HWY
152
ISLAMORADA, FL 33036

Current Mailing Address:

101425 OVERSEAS HWY
815
KEY LARGO, FL 33037

New Mailing Address:

88005 OVERSEAS HWY
152
ISLAMORADA, FL 33036

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
88005 OVERSEAS HWY
152
ISLAMORADA, FL 33036 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

01/12/2009

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

Title: VD () Delete
Name: MUSSELMAN, CAROL
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

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: VD (X) Change () Addition
Name: LINGUETTA, ALEXANDRE
Address: 88005 OVERSEAS HWY # 152
City-St-Zip: ISLAMORADA, FL 33036

Title: VD (X) Change () Addition
Name: JOHNSON, MOLLY
Address: 88005 OVERSEAS HWY # 152
City-St-Zip: ISLAMORDA, FL 33036

Title: VD (X) Change () Addition
Name: LINDBACK, CARL
Address: 88005 OVERSEAS HWY # 152
City-St-Zip: ISLAMORDA, FL 33036

Title: PCBD (X) Change () Addition
Name: ALLEN, CLYDE R
Address: 88005 OVERSEAS HWY # 152
City-St-Zip: ISLAMORDA, FL 33036

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

01/12/2009

Electronic Signature of Signing Officer or Director

Date