2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000005972

FILED Jun 30, 2009 Secretary of State

Entity Name: CONSERVATION INITIATIVE FOR THE ASIAN ELEPHANT, INC.

Current Principal Place of Business: New Principal Place of Business:

405 SE 2ND AVE 626 SE 2ND PLACE

SUITE 6 STE. 3

GAINESVILLE, FL 32601 GAINESVILLE, FL 32601

Current Mailing Address: New Mailing Address:

405 SE 2ND AVE 626 SE 2ND PLACE

SUITE 6 STE. 3

GAINESVILLE, FL 32601 GAINESVILLE, FL 32601

FEI Number: 22-3875149 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

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

CHANDLER, RON
405 SE 2ND AVE
CHANDLER, RON
626 SE 2ND PLACE

SUITE 6 STE. 3
GAINESVILLE, FL 32601 US GAINESVILLE, FL 32601 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: 06/30/2009

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

itle: P () Delete Title: P (X) Change () Addition

 Name:
 CHANDLER, RON
 Name:
 CHANDLER, RON

 Address:
 405 SE 2ND AVE, SUITE 6
 Address:
 626 SE 2ND PLACE, STE. 3

 City-St-Zip:
 GAINESVILLE, FL 32601
 City-St-Zip:
 GAINESVILLE, FL 32601

Title: Title: (X) Change () Addition () Delete Name: WILLIAMS, AMIRTHRARAJ Name: WILLIAMS, AMIRTHRARAJ Address: 405 SE 2ND AVE, SUITE 6 Address: 626 SE 2ND PLACE, STE, 3 City-St-Zip: GAINESVILLE, FL 32601 City-St-Zip: GAINESVILLE, FL 32601

Title: S () Delete Title: () Change () Addition

 Name:
 MORENO, MMI K
 Name:

 Address:
 10135 NW 25TH PLACE
 Address:

 City-St-Zip:
 GAINESVILLE, FL 32606
 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: RON L. CHANDLER P 06/30/2009