

2009 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N08000005385

FILED
Nov 04, 2009
Secretary of State

Entity Name: SAVE AFRICA INC

Current Principal Place of Business:

9000 REGENCY SQUARE BLVD
FIRST FLOOR
JACKSONVILLE, FL 32211 US

Current Mailing Address:

9000 REGENCY SQUARE BLVD
FIRST FLOOR
JACKSONVILLE, FL 32211 US

New Principal Place of Business:

6501 ARLINGTON EXPRESSWAY
B-158
JACKSONVILLE, FL 32211 US

New Mailing Address:

6501 ARLINGTON EXPRESSWAY
B-158
JACKSONVILLE, FL 32211 US

FEI Number: 26-2575738 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)
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:

BARRIE, HALIMEH
8787 SOUTHSIDE BLVD
4715
JACKSONVILLE, FL 32256 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: HALIMEH BARRIE

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: SHANNON EL, JERMYN
Address: 10859 NATALIE ASH DR
City-St-Zip: JACKSONVILLE, FL 32218

Title: VP () Delete
Name: BARRIE, HALIMEH
Address: 8787 SOUTHSIDE BLVD #4715
City-St-Zip: JACKSONVILLE, FL 32256 US

Title: VP () Delete
Name: MASON, CHARLES E MR
Address: 1598 HOPE VALLEY DR
City-St-Zip: JACKSONVILLE, FL 32221 US

Title: VP () Delete
Name: NYABAH, SIMON K
Address: 12434 SHERMAN CT
City-St-Zip: JACKSONVILLE, FL 32225 US

Title: VP () Delete
Name: BARRIE-TEAMER, FATNATA Z
Address: 889 WEST COMSTOCK AVE
City-St-Zip: WINTER PARK, FL 32789 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRES (X) Change () Addition
Name: SHANNON EL, JERMYN
Address: 10859 NATALIE ASH DR
City-St-Zip: JACKSONVILLE, FL 32218

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

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Name:
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Name:
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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: HALIMEH BARRIE

VP

11/04/2009

Electronic Signature of Signing Officer or Director

Date