2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jun 27, 2009
Secretary of State

DOCUMENT# N49347

Entity Name: SAVE THE WILDLIFE, INC.

Current Principal Place of Business:

4350 S. E. 145TH STREET
SUMMERFIELD, FL 34491

New Principal Place of Business:

7699 S.E. 86TH AVENUE
NEWBERRY, FL 32669

Current Mailing Address:

4350 S. E. 145TH STREET
SUMMERFIELD, FL 34491

New Mailing Address:

7699 S.E. 86TH AVENUE
NEWBERRY, FL 32669

FEI Number: 59-3150214 **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:

WESTRA, CYNTHIA
4350 S.E. 145TH STREET
SUMMERFIELD, FL 34491 US

Name and Address of New Registered Agent:

WESTRA, CYNTHIA
7699 S.E. 86TH AVENUE
NEWBERRY, FL 32669 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: _____ 06/27/2009
Electronic Signature of Registered Agent — Date

OFFICERS AND DIRECTORS:

Title: DP ( ) Delete
Name: WESTRA, CYNTHIA A
Address: 4350 S.E. 145TH STREET
City-St-Zip: SUMMERFIELD, FL 34491

Title: DC ( ) Delete
Name: WESTRA, DANIEL P.
Address: 4350 S.E. 145TH STREET
City-St-Zip: SUMMERFIELD, FL 34491

Title: D ( ) Delete
Name: PUGH, IRBY G
Address: 218 ANNIE ST.
City-St-Zip: ORLANDO, FL

Title: D ( ) Delete
Name: DODARO, CAROL
Address: 911 FORT CHRISTMAS ROAD
City-St-Zip: CHRISTMAS, FL 32709

Title: D ( ) Delete
Name: MCDONALD, BRAD
Address: 9532 TURKEY OAK BLVD
City-St-Zip: UNION PARK, FL 32817

Title: D ( ) Delete
Name: MATHEWS, DEBBIE
Address: 4515 KINGSVILLE DR
City-St-Zip: COCOA, FL 32927

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change ( ) Addition
Name: WESTRA, CYNTHIA A
Address: 7699 S.E. 86TH AVENUE
City-St-Zip: NEWBERRY, FL 32669

Title: DC (X) Change ( ) Addition
Name: WESTRA, DANIEL P.
Address: 7699 S.E. 86TH AVENUE
City-St-Zip: NEWBERRY, FL 32669

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

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

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: CYNTHIA A WESTRA DP 06/27/2009
Electronic Signature of Signing Officer or Director — Date