2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N93000005474

FILED Jun 18, 2008 Secretary of State

Entity Name: NATURE WORLD WILDLIFE SANCTUARY, INC.

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

 10096 S RIVIERA PT
 7360 S. FINALE PT

 HOMOSASSA, FL 34448
 HOMOSASSA, FL 34446

Current Mailing Address: New Mailing Address:

10096 S RIVIERA PT 7360 S. FINALE PT.

HOMOSASSA, FL 34448 US HOMOSASSA, FL 34446 US

FEI Number: 65-0453911 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:

WOOD, RUTH A OPALL, MARY 10096 S RIVIERA PT 7360 S. FINALE PT.

HOMOSASSA, FL 34448 US HOMOSASSA, FL 34446 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: MARY OPALL 06/18/2008

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Fitle: D () Delete Title: () Change () Addition

 Name:
 OPALL, MARY
 Name:

 Address:
 7360 S FINALE PT
 Address:

 City-St-Zip:
 HOMOSASSA, FL 34446
 City-St-Zip:

Title: T () Delete Title: T (X) Change () Addition

Name: WOOD, RUTH A Name: MICK, DIANE

 Address:
 10096 S RIVIERA
 Address:
 9880 N. MISTY JANELL TER

 City-St-Zip:
 HOMOSASSA, FL 34448
 City-St-Zip:
 CRYSTAL RIVER, FL 34429

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

 Name:
 KNUDSEN, MARION
 Name:
 DUBE, SHIRLEY

 Address:
 P O BOX 418
 Address:
 80 OAK VILLAGE BLVD

 City-St-Zip:
 HOMOSASSA SPRINGS, FL 34447
 City-St-Zip:
 HOMOSASSA, FL 34446

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: MARY OPALL DIR 06/18/2008