2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 23, 2009
Secretary of State

DOCUMENT# N95000005606

Entity Name: SMALL WORLD ZOOLOGICAL GARDENS AND SANCTUARY, INC.

Current Principal Place of Business:

6118 ANGUS VALLEY DR.
WESLEY CHAPEL, FL 33544

New Principal Place of Business:

Current Mailing Address:

6118 ANGUS VALLEY DR.
WESLEY CHAPEL, FL 33544

New Mailing Address:

FEI Number: 59-3465538 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

PARSONS, BILL
6118 ANGUS VALLEY DR.
WESLEY CHAPEL, FL 33544 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: _____

Electronic Signature of Registered Agent — Date

OFFICERS AND DIRECTORS:

Title: D ( ) Delete
Name: PARSONS, BILL
Address: 6118 ANGUS VALLEY DR.
City-St-Zip: WESLEY CHAPEL, FL 33544

Title: D ( ) Delete
Name: WISSMAN, MARGARET A
Address: 6118 ANGUS VALLEY DR.
City-St-Zip: WESLEY CHAPEL, FL 33544

Title: D ( ) Delete
Name: SICARD, PAULA
Address: 4507 WORTHINGTON CIRCLE #4
City-St-Zip: TAMPA, FL

Title: D ( ) Delete
Name: RICHTER, NINA
Address: 711 SOUTH BUNGALOW TERR
City-St-Zip: TAMPA, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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: BILL PARSONS D 04/23/2009

Electronic Signature of Signing Officer or Director — Date