

# 2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Jan 14, 2003 8:00 am**  
**Secretary of State**

01-14-2003 90054 045 \*\*\*\*70.00

**DOCUMENT # 761899**

1. Entity Name

**INTERSTATE RENEWABLE ENERGY COUNCIL, INC.**



Principal Place of Business

**C/O VICKI MASTAITIS  
PO BOX 1156  
LATHAM NY 12110-1156  
US**

Mailing Address

**C/O VICKI MASTAITIS  
PO BOX 1156  
LATHAM NY 12110-1156  
US**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number **59-2201374**

Applied For

Not Applicable

5. Certificate of Status Desired

**\$8.75** Additional  
Fee Required

6. Name and Address of Current Registered Agent

**BLOCK, DAVID  
1679 CLEARLAKE RD.  
COCOA FL 32922**

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

**FL**

Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW: FEE IS \$61.25**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00** May Be  
Added to Fees

**Make Check Payable to  
Florida Department of State**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	Change	Addition
CD	MASTAITIS, VICKI	P.O. BOX 1156 N/A	LATHAM NY	<input type="checkbox"/>	<input type="checkbox"/>
SD	BERRY, CLINTON	320 SIXTH AVE N, 6 FL	NASHVILLE TN	<input type="checkbox"/>	<input type="checkbox"/>
VCD	WARNER, DAVID	1617 COLE BLVD.	GOLDEN CO	<input type="checkbox"/>	<input type="checkbox"/>
T	JURMAN, KEN	202 N 9TH ST, 8TH TERR.	RICHMOND VA 23219	<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1-7-03

518 459 2601

CR2E037 (10/02)