

2000 UNIFORM BUSINESS REPORT (UBR)

FILED
Jan 21, 2000 8:00 am
Secretary of State

01-21-2000 90127 026 ****61.25

DOCUMENT # 814442

1. Entity Name

THE NATURE CONSERVANCY, INC.

Principal Place of Business

Mailing Address

4245 N. FAIRFAX DR
 LEGAL DEP SUITE 600
 ARLINGTON VA 22203-1606
 US

4245 N. FAIRFAX DR
 LEGAL DEP SUITE 600
 ARLINGTON VA 22203-1606
 US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

53-0242652

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired

\$8.75 Additional Fee Required



DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

CT CORPORATION SYSTEM
1200 S. PINE ISLAND ROAD
PLANTATION FL 33324

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.

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 Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE: PD Delete
 NAME: SAWHILL, JOHN, C
 STREET ADDRESS: ~~1815 N LYNN ST~~
 CITY-ST-ZIP: ARLINGTON VA

TITLE: Change Addition
 NAME:
 STREET ADDRESS: 4245 North Fairfax Drive
 CITY-ST-ZIP:
 Change Addition

TITLE: TD Delete
 NAME: FITZGERALD III, THOMAS J
 STREET ADDRESS: 3917 HARRISON NW
 CITY-ST-ZIP: WASHINGTON DC

TITLE: Change Addition
 NAME:
 STREET ADDRESS:
 CITY-ST-ZIP:
 Change Addition

TITLE: VPCD Delete
 NAME: ~~HALL, DOUGLAS~~
 STREET ADDRESS: ~~1815 N LYNN ST~~
 CITY-ST-ZIP: ~~ARLINGTON VA~~

TITLE: Change Addition
 NAME: W. William Weeks
 STREET ADDRESS: 4245 North Fairfax Drive
 CITY-ST-ZIP: Arlington VA 22203-1606
 Change Addition

TITLE: VPD Delete
 NAME: CULTER, RAYMOND M.
 STREET ADDRESS: 7810 FREEHOLLOW DR
 CITY-ST-ZIP: FALLS CHURCH VA

TITLE: Change Addition
 NAME:
 STREET ADDRESS:
 CITY-ST-ZIP:
 Change Addition

TITLE: SD Delete
 NAME: FLINT, PAUL H. JR
 STREET ADDRESS: ~~1815 N LYNN STREET~~
 CITY-ST-ZIP: ARLINGTON VA

TITLE: Change Addition
 NAME:
 STREET ADDRESS: 4245 North Fairfax Drive
 CITY-ST-ZIP:
 Change Addition

TITLE: Delete
 NAME:
 STREET ADDRESS:
 CITY-ST-ZIP:
 Change Addition

TITLE: Change Addition
 NAME:
 STREET ADDRESS:
 CITY-ST-ZIP:
 Change Addition

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** *Paul H. Flint* **Flint**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

January 7, 2000 703/841-5300

Date

Daytime Phone #

CR2E037 (9/99)