

**F15000004573**

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(Requestor's Name)

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(Address)

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(City/State/Zip/Phone #)

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\_\_\_\_\_  
(Business Entity Name)

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(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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TALLAHASSEE, FLORIDA

*[Handwritten Signature]*  
10/15/14

**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** Ecumenical Development Corporation, U.S.A.  
\_\_\_\_\_  
Name of Corporation – must include suffix

Dear Sir or Madam:

The enclosed "Application by Foreign Not for Profit Corporation for Authorization to Conduct its Affairs in Florida", "Certificate of Existence", or "Certificate of Status" and check are submitted to register the above referenced not for profit corporation to conduct its affairs in Florida.

Please return all correspondence concerning this matter to the following:

Sharlene Brown  
\_\_\_\_\_  
Name of Person  
  
Ecumenical Development Corporation, U.S.A.  
\_\_\_\_\_  
Firm/Company  
  
DBA Oikocredit, USA  
\_\_\_\_\_  
  
1701 K Street, NW, Suite 1201  
\_\_\_\_\_  
Address  
  
Washington, DC 20006  
\_\_\_\_\_  
City/State and Zip Code  
  
sbrown@oikocredit.org  
\_\_\_\_\_  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Sharlene Brown at ( 202 ) 728-4143  
\_\_\_\_\_  
Name of Person Area Code Daytime Telephone Number

**MAILING ADDRESS:**  
Registration Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

**STREET/COURIER ADDRESS:**  
Registration Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

Enclosed is a check for the following amount:

- \$70.00 Filing Fee
- \$78.75 Filing Fee & Certificate of Status
- \$78.75 Filing Fee & Certified Copy
- \$87.50 Filing Fee, Certificate of Status & Certified Copy



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

September 3, 2015

SHARLENE BROWN  
1701 K STREET, NW, STE. 1201  
WASHINGTON, DC 20006

SUBJECT: ECUMENICAL DEVELOPMENT CORPORATION, U.S.A.  
Ref. Number: W15000058622

We have received your document for ECUMENICAL DEVELOPMENT CORPORATION, U.S.A. and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document must contain a registered agent with a Florida street address and a signed statement of acceptance. (i.e. I hereby am familiar with and accept the duties and responsibilities of Registered Agent.)

~~A certificate of existence or a certificate of good standing, dated no more than 90 days prior to the delivery of the application to the Department of State, duly authenticated by the secretary of state or other official having custody of the records in the jurisdiction under the laws of which it is incorporated/organized, must be submitted to this office.~~ A translation of the certificate under oath of the translator must be attached to a certificate which is in a language other than the English language. A photocopy of this certificate is not acceptable.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Michelle Milligan  
Senior Section Administrator

Letter Number: 915A00018727

**APPLICATION BY FOREIGN NOT FOR PROFIT CORPORATION FOR AUTHORIZATION TO CONDUCT ITS AFFAIRS IN FLORIDA**

IN COMPLIANCE WITH SECTION 617.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN NOT FOR PROFIT CORPORATION FOR AUTHORIZATION TO CONDUCT ITS AFFAIRS IN THE STATE OF FLORIDA:

1. Ecumenical Development Corporation, U.S.A.  
(Name of corporation: must include the word "INCORPORATED" or "CORPORATION" or words or abbreviations of like import in language as will clearly indicate that it is a corporation instead of a natural person or partnership if not so contained in the name at present. "Company" or "Co." may not be used as a corporate suffix by a nonprofit corporation.)

~~Oikocredit, USA~~

(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)

2. Illinois 3. 55859736  
(State or country under the law of which it is incorporated) (FEI number, if applicable)

4. March 1, 1990 5. \_\_\_\_\_  
(Date of Incorporation) (Date of duration, if other than perpetual)

6. \_\_\_\_\_  
(Date first conducted affairs in Florida if prior to registration. See sections 617.1501 & 617.1502, F.S., to determine penalty liability.)

7. 1701 K Street, NW, Suite 1201, Washington, DC 20006  
(Principal office address)

(Current mailing address, if different)

8. Nonprofit 501(c)(3) Organization with the mission to mobilize financial credit and resources to benefit the poor.  
(Purpose(s) of corporation authorized in home state or country to be carried out in the state of Florida)

9. Name and street address of Florida registered agent: (P.O. Box **NOT** acceptable)

Name: Sharlene Brown

Office Address: 7501 Lyncrest St.

N. Port, Florida 34287  
(City) (Zip Code)

10. Registered agent's acceptance:

*I am familiar with and accept the duties of registered agent.*  
*Sharlene*  
Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this application, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

Sharlene  
(Registered agent's signature)

11. Attached is a certificate of existence duly authenticated, not more than 90 days prior to delivery of this application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the law of which it is incorporated.

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TALLAHASSEE, FLORIDA

12. Names and addresses of officers and/or directors

**A. DIRECTORS**

Chairman: Rev. Gary Cook  
Address: 1701 K Street, NW, Suite 1201, Washington, DC 20006

Vice Chairman: Corrine Florek  
Address: 1701 K Street, NW, Suite 1201, Washington, DC 20006

Director: Cheryl Smith  
Address: 1701 K Street, NW, Suite 1201, Washington, DC 20006

Director: Paul J. Nelson  
Address: 1701 K Street, NW, Suite 1201, Washington, DC 20006

David Mesenbring, Director/1701 K Street, NW, Suite 1201, Washington, DC 20006

**B. OFFICERS**

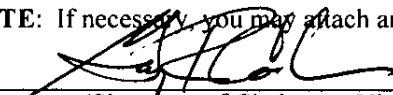
President: Rev. Gary Cook  
Address: 1701 K Street, NW, Suite 1201, Washington, DC 20006

Vice President: Corinne Florek  
Address: 1701 K Street, NW, Suite 1201, Washington, DC 20006

Secretary: Susan Gottshall  
Address: 1701 K Street, NW, Suite 1201, Washington, DC 20006

Treasurer: Paul Neuhauser  
Address: 1701 K Street, NW, Suite 1201, Washington, DC 20006

**NOTE:** If necessary, you may attach an addendum to the application listing additional officers and/or directors.

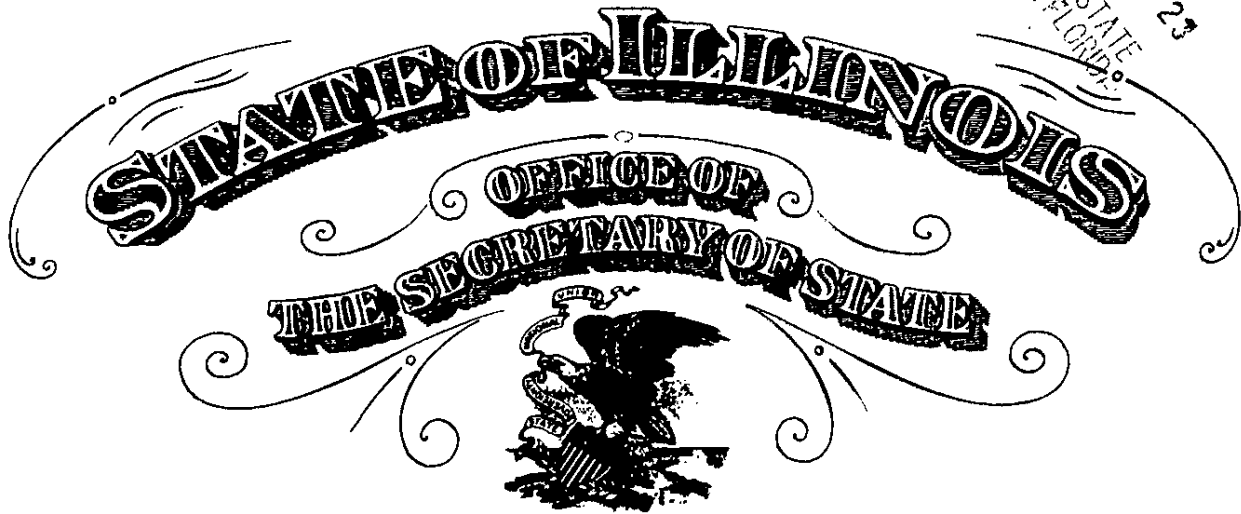
13.   
(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)

14. GARY R. COOK Board Chair.  
(Typed or printed name and capacity of person signing application)

File Number

5585-973-6

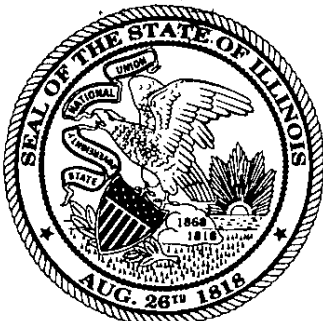
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TALLAHASSEE, FLORIDA



**To all to whom these Presents Shall Come, Greeting:**

*I, Jesse White, Secretary of State of the State of Illinois, do hereby certify that I am the keeper of the records of the Department of Business Services. I certify that*

ECUMENICAL DEVELOPMENT CORPORATION, U.S.A., A DOMESTIC CORPORATION, INCORPORATED UNDER THE LAWS OF THIS STATE ON MARCH 01, 1990, APPEARS TO HAVE COMPLIED WITH ALL THE PROVISIONS OF THE GENERAL NOT FOR PROFIT CORPORATION ACT OF THIS STATE, AND AS OF THIS DATE, IS IN GOOD STANDING AS A DOMESTIC CORPORATION IN THE STATE OF ILLINOIS.



***In Testimony Whereof, I hereto set my hand and cause to be affixed the Great Seal of the State of Illinois, this 2ND day of OCTOBER A.D. 2015 .***

*Jesse White*

SECRETARY OF STATE