

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P32998

1. Entity Name

CLEAN WATER ACTION, INC.

FILED

May 22, 2002 8:00 am
Secretary of State

05-22-2002 90193 033 ****70.00

Principal Place of Business

4455 CONNECTICUT AVE. N.W.
SUITE A300
WASHINGTON DC 20008

Mailing Address

P O BOX 188
MOUNT CLEMENS MI 48046

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

23-7128611

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired



\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

SCANDIKITO, THERESE E
412 NW 72ND STREET
BOCA RATON FL 33487

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
NAME ZWICK, DAVID
STREET ADDRESS 4455 CONNECTICUT AVE, N.W., STE. A300
CITY-ST-ZIP WASHINGTON DC 20008 ☐ Delete

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

TITLE S
NAME STERNO, KATHLEEN
STREET ADDRESS 38875 HARPER AVENUE
CITY-ST-ZIP CLINTON TOWNSHIP MI 48036 ☐ Delete

TITLE S
NAME Aterno, Kathleen
STREET ADDRESS 38875 Harper Avenue
CITY-ST-ZIP Clinton Township MI 48036 ☒ Change ☐ Addition

TITLE CD
NAME FONTENOT, WILLIAM
STREET ADDRESS 632 DREHR
CITY-ST-ZIP BATON ROUGE LA 70806 ☐ Delete

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

TITLE D
NAME GRAVITZ, MICHAEL
STREET ADDRESS 9103 WOODLAND DRIVE
CITY-ST-ZIP SILVER SPRING MD 20910 ☐ Delete

TITLE D
NAME Gravitz, Michael
STREET ADDRESS 4302 Curtis Road
CITY-ST-ZIP Chevy Chase, MD 20815 ☒ Change ☐ Addition

TITLE D
NAME LOCKWOOD, PETER
STREET ADDRESS ONE THOMAS CIRCLE, N.W.
CITY-ST-ZIP WASHINGTON DC 20005 ☐ Delete

TITLE T
NAME Lockwood, Peter
STREET ADDRESS One Thomas Circle, N.W.
CITY-ST-ZIP Washington, DC 20005 ☒ Change ☐ Addition

TITLE D
NAME REDDING, BILL
STREET ADDRESS 214 N HENRY STUIE 203
CITY-ST-ZIP MADISON WI 53703 ☐ Delete

TITLE
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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (9/01)