

FILE NOW: FILING FEE IS \$61.25

NONPROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 761899 (4)

1. Corporation Name

INTERSTATE RENEWABLE ENERGY COUNCIL, INC.



Principal Place of Business

Mailing Address

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

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

3. Date Incorporated or Qualified

02/10/1982

3a. Date of Last Report

02/01/1995

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.
22 City & State
23 Zip
24 Country

4. FEI Number

59-2201374

Applied For
Not Applicable

5. Certificate of Status Desired

☐ **\$8.75 Additional Fee Required**

6. Election Campaign Financing
Trust Fund Contribution

☐ **\$5.00 May Be Added to Fees**

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes

☐ Yes ☒ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**BLOCK, DAVID
300 STATE ROAD 401
CAPE CANAVERAL FL 32920**

81 Name

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

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE	CD	☐ DELETE
NAME	MASTAITIS, VICKI	
STREET ADDRESS	2 EMPIRE STATE PLAZA, STE 1001	
CITY-ST-ZIP	ALBANY NY	
TITLE	SD	☐ DELETE
NAME	BERRY, CLINTON	
STREET ADDRESS	320 SIXTH AVE N, 6 FL	
CITY-ST-ZIP	NASHVILLE TN	
TITLE	VCD	☐ DELETE
NAME	WARNER, DAVID	
STREET ADDRESS	1617 COLE BLVD.	
CITY-ST-ZIP	GOLDEN CO	
TITLE	T	☐ DELETE
NAME	DEANGELIS, MIKE	
STREET ADDRESS	1516 9TH ST	
CITY-ST-ZIP	SACRAMENTO CA	
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	☒ Change ☐ Addition
1.2 NAME	
1.3 STREET ADDRESS	PO Box 1156
1.4 CITY-ST-ZIP	LATHAM, NY 12110
2.1 TITLE	☐ Change ☐ Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY-ST-ZIP	
3.1 TITLE	☐ Change ☐ Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY-ST-ZIP	
4.1 TITLE	☐ Change ☐ Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP	
5.1 TITLE	☐ Change ☐ Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	☐ Change ☐ Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY-ST-ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

Vicki Mastaitis

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/27/96

518 454-2601

DATE

Daytime Phone #

CR2E037 (12/95)