2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

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Secretary of State
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Entity Name: INTERNATIONAL INSTITUTE FOR BAUBIOLOGIE & ECOLOGY, INC.

Current Principal Place of Business:

211 S. BRENT
VENTURA, CA 93003

Current Mailing Address:

P.O. BOX 8520
SANTA FE, NM 87504 US

FEI Number: 59-3162702

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

INCORP SERVICES, INC.
17888 67TH COURT NORTH
LOXAHATCHEE, FL 33470 US

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:

Electronic Signature of Registered Agent — Date

Officer/Director Detail :

Title	DIR
Name	HOGLANDER, SONIA
Address	P.O. BOX 3370
City-State-Zip:	RENTON WA 98056

Title	DIR
Name	BURMASTER, M. SPARK
Address	2126 WING HOLLOW RD, POB 137
City-State-Zip:	CHASEBURG WI 54621

Title	DIR
Name	MCLAUGHLIN, JEANNE
Address	125 WHITAKER DRIVE
City-State-Zip:	SAXONBURG PA 16056

Title	DIRECTOR
Name	BAKER-LAPORTE, PAULA
Address	1131 PARADISE LANE
City-State-Zip:	ASHLAND OR 97520

Title	DIR
Name	BELL, CHRIS
Address	606 SOUTH 4TH ST.
City-State-Zip:	FAIRFIELD IA 52556

Title	DIR
Name	GUST, LARRY
Address	211 S BRENT ST
City-State-Zip:	VENTURA CA 93003

Title	EXECUTIVE DIRECTOR
Name	CONN, MICHAEL
Address	P.O. BOX 8520
City-State-Zip:	SANTA FE NM 87504

Title	DIRECTOR
Name	DAVIS, MARTINE
Address	1213 SHERMAN AVENUE
City-State-Zip:	MADISON WI 53704

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I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.

SIGNATURE: MICHAEL CONN EXECUTIVE DIRECTOR 03/02/2017

Electronic Signature of Signing Officer/Director Detail — Date

Officer/Director Detail Continued :

Title	DIRECTOR
Name	STADTNER, ALEX
Address	369-B 3RD STREET #521
City-State-Zip:	SAN RAPHAEL CA 94901