

2019 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N49273

Entity Name: INTERNATIONAL INSTITUTE FOR BAUBIOLOGIE & ECOLOGY, INC.**FILED**
Mar 05, 2019
Secretary of State
1181847271CC**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 BELL, CHRIS
Address 606 SOUTH 4TH ST.
City-State-Zip: FAIRFIELD IA 52556

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

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

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

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

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

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

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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****03/05/2019**

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title	DIRECTOR
Name	PACE, ANDREW
Address	2201 BADGER COURT
City-State-Zip:	WAUKESHA WA 53188