

2025 FOREIGN NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P32998

Entity Name: CLEAN WATER ACTION, INC.**Current Principal Place of Business:**1444 EYE ST NW STE 400
WASHINGTON, DC 20005**Current Mailing Address:**PO BOX 188
MOUNT CLEMENS, MI 48046 US**FEI Number:** 23-7128611**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**REGISTERED AGENTS INC
7901 4TH ST N STE 300
ST. PETERSBURG, FL 33702 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 PRESIDENT
Name CARTER, JEFFREY C
Address 1444 EYE ST NW STE 400
City-State-Zip: WASHINGTON DC 20005

Title TREASURER
Name SHADBURN, LAWSON
Address 1444 EYE ST NW STE 400
City-State-Zip: WASHINGTON DC 20005

Title DIRECTOR
Name VERKITUS, TONYEHN
Address 1444 EYE ST NW STE 400
City-State-Zip: WASHINGTON DC 20005

Title VICE CHAIR
Name MILLER TRAVIS, VERNICE
Address 1444 EYE ST NW STE 400
City-State-Zip: WASHINGTON DC 20005

Title SECRETARY
Name GIPSON, LEWANDA
Address 1444 EYE ST NW STE 400
City-State-Zip: WASHINGTON DC 20005

Title VP
Name VICE PRESIDENT, NO
Address 1444 EYE ST NW STE 400
City-State-Zip: WASHINGTON DC 20005

Title CHAIR
Name REID KOEZE, KATE
Address 1444 EYE ST NW STE 400
City-State-Zip: WASHINGTON DC 20005

Title DIRECTOR
Name FAKE, MARY ANN
Address 1444 EYE ST NW STE 400
City-State-Zip: WASHINGTON DC 20005

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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: LEWANDA GIPSON**SECRETARY****04/11/2025**

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title DIRECTOR
Name RISSER, JULIE
Address 1444 EYE ST NW STE 400
City-State-Zip: WASHINGTON DC 20005

Title DIRECTOR
Name WALSH, RANDY
Address 1444 EYE ST NW STE 400
City-State-Zip: WASHINGTON DC 20005

Title DIRECTOR
Name PERALES, MARISA
Address 1444 EYE ST NW STE 400
City-State-Zip: WASHINGTON DC 20005

Title DIRECTOR
Name YOUNG, MARGUERITE
Address 1444 EYE ST NW STE 400
City-State-Zip: WASHINGTON DC 20005