2001 UNIFORM BUSINESS REPORT (UBR)

changed, or on an attachment with an

address, with all other like empowered.

Feb 13, 2001 8:00 am **DOCUMENT # 761899** Secretary of State 1. Entity Name INTERSTATE RENEWABLE ENERGY COUNCIL, INC. 02-13-2001 90585 049 ****70.00 Principal Place of Business Mailing Address C/O VICKI MASTAITIS C/O VICKI MASTAITIS PO BOX 1156 PO BOX 1156 LATHAM NY 12110-1156 LATHAM NY 12110-1156 US 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Applied For City & State City & State 4. FEI Number 59-2201374 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent Name and Address of Current Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) BLOCK, DAVID 1679 CLEARLAKE RD. COCOA FL 32922 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 (NOTE: Registered Agent signature required when reinstating) DATE Signature, typed or printed game of registered agent and title if applicable 9. Election Campaign Financing Make Check Payable to FILE NOW: \$5.00 May Be Trust Fund Contribution. Added to Fees **Department of State FEE IS \$61.25** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 OFFICERS AND DIRECTORS 10. 11. ☐ Delete TITLE Change ☐ Addition TITLE NAME MASTAITIS, VICKI NAME STREET ADDRESS STREET ADDRESS P.O. BOX 1156 N/A CITY-ST-ZIP CITY-ST-ZIP LATHAM NY SD ☐ Delete TITLE Change ☐ Addition TITLE BERRY, CLINTON NAME NAME STREET ADDRESS 320 SIXTH: AVE: N.: 6-FL ---: STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP NASHVILE TN VCD TITLE ☐ Change ☐ Addition Delete TITLE WARNER, DAVID NAME NAME STREET ADDRESS STREET ADDRESS 1617 COLE BLVD. CITY-ST-ZIP CITY-ST-ZIP **GOLDEN CO** Change TITLE KEN JURMAN ☐ Addition ☐ Delete TITLE 202 N. 9th ST, 8ME DEANGELIS, MIKE NAME NAME STREET ADDRESS STREET ADDRESS 1516 9TH ST RICHMOND, VA CITY-ST-ZIP CITY-ST-ZIP SACRAMENTO CA Change ☐ Addition ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE □ Delete TITLE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 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

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