FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

Suite, Apt. #, etc.

SIGNATURE:

City & State

22

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Zip

848906

(4)

Suite, Apt. #, etc.

City & State

Zφ

ENVIRONMENTAL DEFENSE FUND, INCORPORATED

Principal Place of Business	Mailing Address	
257 PARK AVENUE SOUTH NEW YORK NY 10010	257 PARK AVENUE SOUTH NEW YORK NY 10010-7304	
2. Principal Place of Business	2a. Mailing Address	
21	26	

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25 29 9. Name and Address of Current Registered Agent

Country

SHELLIE, LOIS 20725 SOUTHWEST 114TH PLACE MIAMI FL 33189 FILED
May 21 1997 8:00am
Secretary of State



Yes No

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

10. Name and Address of New Registered Agent

3a. Date of Last Report

04/26/1996

Applied For

\$8.75 Additional

Fee Required

\$5,00 May Be

Added to Fees

Not Applicable

3. Date Incorporated or Qualified

04/21/1981

11-6107128

5. Certificate of Status Desired

6. Election Campaign Financing

Trust Fund Contribution

Florida Statutes

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

4. FEI Number

MIAMI FL 33189			83	83							
			84	City	FL	85 2	ip 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 _					e required when reinstating) DATE						
	Signature, typed or printed name of registered agent and little if applica OFFICERS AND DIRECTORS		stered Age	ent signatur	e required when reinstating) DATE ADDITIONS/CHANGES TO OFFICERS AND	DIRECT	TORS IN 12				
12.	TR		1.1 TITLE		The state of the s	Chan					
1	ALDERMAN, NANCY O		1.2 NAME								
NAME	1191 RIDGE ROAD			ADDRESS							
STREET ADDRESS	NORTH HAVEN CT										
CITY-ST-ZIP			1.4 CITY - 9 2.1 TITLE	51-212		Chan	oe Addition				
TITLE	TR BENEVIEW MENDY		2.2 NAME								
NAME	BENCHLEY, WENDY		,	T ADDRESS							
STREET ADDRESS	35 BOUDINOT STREET										
City-St-ZiP	PRINCETON NJ		2.4 CITY- 3.1 TITLE	51-ZIP	,	Chan	ge [] Addition				
TIFLE	TR					L. D. K.					
NAME	BENKARD, JAMES W.B.		3.2 NAME								
STREET ADDRESS	1192 PARK AVENUE			T ADORESS							
CITY - ST - ZIP	NEW YORK NY		3.4. CITY- 4.1 TITLE	ST-ZIP		Char	nge Addition				
TITLE	TR		, ,			<u> </u>	Ma Call Manual				
NAME	BINGHAM, SALLY G	•	4. 2 NAME				•				
STREET ADDRESS	CHANGE OF			T ADDRESS							
CITY-ST-ZIP	SAN FRANCISCO CA		4.4 CITY-	ST-ZIP		Char	nge Addition				
TITLE	TR		5.1 TITLE				in The State of th				
NAME	CATTO, JESSICA		5.2 NAME		•						
STREET ADDRESS	1036 LITTLE WOODY CREEK	L	5.3 STREE	T ADDRESS							
CITY-ST-ZIP	WOOD CREEK CO		5.4 CITY-	ST-ZIP		1 1 0 .					
TITLE	TR	☐ DELETE	6.1 TITLE			Char	nge 🔲 Addition				
NAME	CECIL, MARY R. (MIMI)		6.2 NAME								
STREET ADDRESS	7 FRITH DRIVE	L	6.3 STREE	t address							
CITY-ST-ZIP	ASHEVILLE NC		6.4 CITY -								
14. I do 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 annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under eath; 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 schanged, or an an attachment with an address.											

Country

Name

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