



# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Aug 22, 2008 8:00 am**  
**Secretary of State**

08-22-2008 90001 013 \*\*\*\*61.25

<b>DOCUMENT # F03000005639</b> 1. Entity Name <b>EARTH FORCE, INC.</b>					
Principal Place of Business <b>1908 MOUNT VERNON AVENUE 2120 W. 33RD AVE 2ND FLOOR ALEXANDRIA, VA 22301</b> <b>DENVER CO 80211</b>				Mailing Address <b>1908 MOUNT VERNON AVENUE 2ND FLOOR ALEXANDRIA, VA 22301</b>	
2. Principal Place of Business - No P.O. Box # <b>2120 W. 33RD AVE</b> Suite, Apt. #, etc.		3. Mailing Address <b>301 PENINSULA DR</b> Suite, Apt. #, etc. <b>SUITE 5</b>			
City & State <b>DENVER CO</b>		City & State <b>ERIE PA</b>		4. FEI Number <b>52-1830873</b>	
Zip <b>80211</b>		Country <b>US</b>		5. Certificate of Status Desired <input type="checkbox"/> <b>\$8.75 Additional Fee Required</b>	
6. Name and Address of Current Registered Agent <b>NOE, CHRISTOPHER</b> <b>10360 CARROLLWOOD LANE</b> <b>UNIT 218</b> <b>TAMPA, FL 33618</b>				7. Name and Address of New Registered Agent Name <b>SCOTT WILLIS</b> Street Address (P.O. Box Number is Not Acceptable) <b>734 PLACIDO WAY NE</b> City <b>ST PETERSBURG FL</b> Zip Code <b>33704</b>	
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. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE <u>SCOTT WILLIS</u> <span style="float: right;">8-6-08</span> <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE</small>					
<b>Filing Fee is \$61.25</b> <b>Due by September 12, 2008</b>		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		<b>\$5.00 May Be Added to Fees</b>	
<b>Make check payable to Florida Department of State</b>					
<b>10. OFFICERS AND DIRECTORS</b>			<b>11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10</b>		
TITLE <b>PRES</b> NAME <b>MELDRUM, VINCE</b> STREET ADDRESS <b>1908 MOUNT VERNON AVENUE, 2ND FLOOR</b> CITY-ST-ZIP <b>ALEXANDRIA, VA 22301</b>	<input checked="" type="checkbox"/> Delete		TITLE <b>PRES</b> NAME <b>STANLEY M. KROH</b> STREET ADDRESS <b>PO BOX 111</b> CITY-ST-ZIP <b>TAMPA FL 33601</b>	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	
TITLE <b>DIR</b> NAME <b>BATES, CHRISTINE</b> STREET ADDRESS <b>1996 TECHNOLOGY DRIVE</b> CITY-ST-ZIP <b>TROY, MI 480834243</b>	<input type="checkbox"/> Delete		TITLE <b>VICE PRES</b> NAME <b></b> STREET ADDRESS <b></b> CITY-ST-ZIP <b></b>	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE <b>DIR</b> NAME <b>MACGREGOR, JAMES</b> STREET ADDRESS <b>200 WATER STREET, PH-06</b> CITY-ST-ZIP <b>NEW YORK, NY 10038</b>	<input type="checkbox"/> Delete		TITLE <b>PRES</b> NAME <b></b> STREET ADDRESS <b></b> CITY-ST-ZIP <b></b>	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE <b>DIR</b> NAME <b>KOHLMOOS, JAMES W</b> STREET ADDRESS <b>1718 CONNECTICUT AVE., N.W., SUITE 700</b> CITY-ST-ZIP <b>WASHINGTON, DC 20009</b>	<input checked="" type="checkbox"/> Delete		TITLE <b>TREAS</b> NAME <b>JIMMY L. MILLER JR</b> STREET ADDRESS <b>3473 W. 32ND AVE</b> CITY-ST-ZIP <b>DENVER CO 80211</b>	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	
TITLE <b>EDIR</b> NAME <b>BARDWELL, LISA PH.D.</b> STREET ADDRESS <b>2555 WEST 34TH AVE</b> CITY-ST-ZIP <b>DENVER, CO 80211</b>	<input type="checkbox"/> Delete		TITLE <b>CEO</b> NAME <b></b> STREET ADDRESS <b></b> CITY-ST-ZIP <b></b>	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE <b>DIR</b> NAME <b>FRYMOYER, BILL</b> STREET ADDRESS <b>2100 M STREET, NW, #200</b> CITY-ST-ZIP <b>WASHINGTON, DC 20037</b>	<input checked="" type="checkbox"/> Delete		TITLE <b>DIR</b> NAME <b>DR. TERRY WILSON</b> STREET ADDRESS <b>131 JONES - JAGGERS HALL</b> <b>1816 RED WAY</b> <b>BOWLING GREEN KY 42101</b>	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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 changed, or on an attachment with an address, with all other like empowered.					
SIGNATURE <u>Scott Willis</u> <span style="float: right;">8-11-08</span> <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE</small>					

# ATTACHMENT

EARTH FORCE, INC.  
52-1830873

40114062  
#F0300000 5639

Individual responsible for custody of funds and financial records; authorized to sign checks

Annette Marshall, OSB, Director of Administration  
301 Peninsula Drive , Suite #5  
Erie, PA 16505