2000 UNIFORM BUSINESS REPORT (UBR)

SIGNATURE:

SIGNATURE AND TYPED OR RINTED NAME OF SIGNING OFFICER OR DIRECTOR

FILED DOCUMENT # F9400000204 Jul 19, 2000 8:00 am Secretary of State THE AMERICAN FORESTRY ASSOCIATION, INCORPORATED 07-19-2000 90010 048 ****61.25 Principal Place of Business Mailing Address 910 17TH ST. NW POST OFFICE BOX 2000 #600 WASHINGTON DC 20013 WASHINGTON DC 20006 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State Applied For 4. FEI Number 53-0196544 Not Applicable Zip Zip Country Country \$8.75 Additional \Box 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) MASTERSON, NANCY S 33 SW 2ND AVE. **SUITE 1105** City Zip Code **MIAMI FL 33130** 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 Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE FILE NOW: FEE IS \$61.25 9. Election Campaign Financing Make Check Payable to \$5.00 May Be After September 13, 2000 min. will be \$236.25 Trust Fund Contribution. Added to Fees **Department of State** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. OFFICERS AND DIRECTORS SANSOLO, JACK 1)T/ F ☐ Change Addition TITLE Delete PORTERFIELD, RICHARD NAME NAME P.O. BOX 97000 STREET ADDRESS STREET ADDRESS 910 17TH ST. NW CITY-ST-ZIP REDMOND WA 98073-9700 CITY-ST-7/P WASHINGTON DC 20006 Director ☐ Delete TITLE TITLE HILL VADA 3900 Wisconson Ave., NW SILVER, JONATHAN NAME NAME STREET ADDRESS STREET ADDRESS 910 17TH ST. NW 46 NINGTON, OC 200/6-CITY-ST-ZIP WASHINGTON DC 20006 CITY-ST-ZIP TITLE ☐ Delete TITLE COWAN, DOUG NAME NAME STREET ADDRESS 910 17TH ST. NW STREET ADDRESS WASHINGTON DC 20006 CITY-ST-ZIP TITLE ☐ Detete TITLE ☐ Change ☐ Addition HALL, DOUG NAME 910 17TH ST. NW STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP WASHINGTON DC 20006 Delete TITLE TITLE ☐ Change ■ Addition HUBBARD, JAMES NAME NAME STREET ADDRESS 910 17TH ST. NW STREET ADDRESS CITY-ST-ZIP WASHINGTON DC 20006 City-St-ZIP Delete TITLE TITLE ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-79 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 changed, or on an attachment with an address, with all other like empowered.

LONATHAN SILVER 7-10-00