

-SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 15, 1999.
AMOUNT DUE ON OR BEFORE 09/15/99: \$61.25 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$236.25).

NONPROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
Aug 17, 1999 8:00 am
Secretary of State

08-17-1999 90013 034 ****61.25

DOCUMENT # F95000001390

1. Corporation Name

EARTH COUNCIL FOUNDATION - US, INC.

Principal Place of Business

% SUSAN A. COBB
1250 CONNECTICUT AVE., N.W., SUITE 700
WASHINGTON DC 20036

Mailing Address

139 EGRET DRIVE
1250 CONNECTICUT AVE., N.W., SUITE 700
JUPITER FL 33458
US



2. Principal Place of Business

21 Suite, Apt. #, etc.

23 City & State

24 Zip

Country

2a. Mailing Address

26 Suite, Apt. #, etc.

28 City & State

29 Zip

Country

3. Date Incorporated or Qualified

03/23/1995

4. FEI Number

52-1693157

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional
Fee Required

6. Election Campaign Financing

Trust Fund Contribution

\$5.00 May Be
Added to Fees

9. Name and Address of Current Registered Agent

ROGOL, MARTIN H
139 EGRET DRIVE
JUPITER FL 33458

10. Name and Address of New Registered Agent

81 Name

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

83

84 City

FL

85 Zip 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

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12.

OFFICERS AND DIRECTORS

TITLE P ☐ DELETE

NAME ROGOL, MARTIN H
STREET ADDRESS 139 EGRET DRIVE
CITY-ST-ZIP JUPITER FL 33458

TITLE V ☐ DELETE

NAME MACNEILL, JAMES
STREET ADDRESS 110 RIDEAU TER.
CITY-ST-ZIP OTTAWA, CANADA

TITLE SD ☐ DELETE

NAME SHIBUYA, HIRONOBU
STREET ADDRESS 1140 19TH ST., N.W.
CITY-ST-ZIP WASHINGTON DC 20036

TITLE TD ☐ DELETE

NAME STRONG, MAURICE F
STREET ADDRESS 700 UNIVERSITY AVE. 253 CONSUMERS RD.
CITY-ST-ZIP TORONTO, ONTARIO

TITLE D ☒ DELETE

NAME THACHER, PETER S
STREET ADDRESS 54 GOLD ST.
CITY-ST-ZIP STONINGTON CT 06378

TITLE D ☐ DELETE

NAME KALOW, MAXIMO
STREET ADDRESS PO BOX 2323-1002 N/A
CITY-ST-ZIP SAN JOSE CO

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

14. 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (5/99)