

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000011807

FILED
May 03, 2005
Secretary of State

Entity Name: EARTH CHARTER USA COMMUNITIES INITIATIVES NOT FOR PROFIT CORPORATION

Current Principal Place of Business:

2109 BAYSHORE BLVD
804
TAMPA, FL 33606

New Principal Place of Business:

Current Mailing Address:

2109 BAYSHORE BLVD
804
TAMPA, FL 33606

New Mailing Address:

FEI Number: 11-3736650 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

ROBERTS, JAN M
2109 BAYSHORE BLVD
804
TAMPA, FL 33606 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: ROBERTS, JAN M
Address: 2109 BAYSHORE BLVD, #804
City-St-Zip: TAMPA, F: 33606 US

Title: VP () Delete
Name: CASTAIN, ESTHER
Address: 3245 SEPULVEDA BLVD, #207
City-St-Zip: LOS ANGELES, CA 90034

Title: SEC () Delete
Name: ROBSON, ANDY PH.D.
Address: U OF WISC, 800 ALGOMA BLVD
City-St-Zip: OSHKOSH, WI 54901

Title: TREA () Delete
Name: SKYPEK, GENIE
Address: 2528 TENNESSEE AVENUE
City-St-Zip: TAMPA, FL 33629

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: S (X) Change () Addition
Name: CASTAIN, ESTHER
Address: 3245 SEPULVEDA BLVD, #207
City-St-Zip: LOS ANGELES, CA 90034

Title: V (X) Change () Addition
Name: ROBSON, ANDY PH.D.
Address: U OF WISC, 800 ALGOMA BLVD
City-St-Zip: OSHKOSH, WI 54901

Title: T (X) Change () Addition
Name: SKYPEK, GENIE
Address: 2528 TENNESSEE AVENUE
City-St-Zip: TAMPA, FL 33629

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JAN M. ROBERTS

P

05/03/2005

Electronic Signature of Signing Officer or Director

Date