

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N97000002695

1. Entity Name

COALITION OF ENVIRONMENTAL FEDERATIONS, INC.

FILED

Jun 19, 2000 8:00 am
Secretary of State

06-19-2000 90007 020 ****61.25

Principal Place of Business

622 SOUTH FLORIDA AVENUE
LAKELAND FL 33608

Mailing Address

622 SOUTH FLORIDA AVENUE
LAKELAND FL 33801-5231

2. Principal Place of Business

535 Central Ave.

3. Mailing Address

535 Central Ave

Suite, Apt. #, etc.

#410

Suite, Apt. #, etc.

#410

City & State

St. Petersburg FL

City & State

St. Petersburg FL

Zip

33701-3703

Country

USA

Zip

33701-3703

Country

USA

4. FEI Number

59-3460958

Applied For

Not Applicable

5. Certificate of Status Desired

☐ \$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

BOWDEN, LEECY
622 SOUTH FLORIDA AVENUE
LAKELAND FL 33608

7. Name and Address of New Registered Agent

Name
Melissa Metcalfe

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

535 Central Ave. #410

City
St. Petersburg

FL

Zip Code

33701-

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.

3703

SIGNATURE

Melissa Metcalfe MELISSA METCALFE

6/12/00

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

(NOTE: Registered Agent signature required when reinstating)

FILE NOW:
FEE IS \$61.25

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make Check Payable to
Department of State

10. OFFICERS AND DIRECTORS

TITLE DP ☐ Delete
NAME ROLLS, ALICE
STREET ADDRESS 1447 PEACHTREE ST., SUITE 502
CITY-ST-ZIP ATLANTA GA 30309

TITLE DV ☐ Delete
NAME BURWELL, KEITH
STREET ADDRESS 331 MAIN W. MAIN, SUITE 611
CITY-ST-ZIP DURHAM NC 27702

TITLE DS ☐ Delete
NAME NEUMAN, LAURA S
STREET ADDRESS 1915-A ALFRED AVE
CITY-ST-ZIP ST LOUIS MO 63110

TITLE DT ☐ Delete
NAME SAMEH, SARAH
STREET ADDRESS BOX 40333 ((N/A))
CITY-ST-ZIP PORTLAND OR 97240

TITLE D ☒ Delete
NAME DENNY, MARIA
STREET ADDRESS 1402 THIRD AVE., SUITE 525
CITY-ST-ZIP SEATTLE WA 98101

TITLE D ☒ Delete
NAME EACKER, JIM
STREET ADDRESS PO BOX 257 ((N/A))
CITY-ST-ZIP WOODSTOCK MD 21163

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE D ☐ Change ☒ Addition
NAME Noelle Richmond
STREET ADDRESS
CITY-ST-ZIP

TITLE D ☐ Change ☒ Addition
NAME Jill Lewis
STREET ADDRESS 2840 E. Grand River Ave., Suite 5
CITY-ST-ZIP East Lansing, MI 48823

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

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.

SIGNATURE:

Laura S. Neuman LAURA S. NEUMAN, 5/19/2000 (314) 771-6668

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CF2 EX-17 (9/99)