2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N97000003240

FILED May 11, 2004 Secretary of State

Entity Name: CEIBA FOUNDATION FOR TROPICAL CONSERVATION, INC.

New Principal Place of Business: Current Principal Place of Business: 2319 N. CLEVELAND CHICAGO, IL 60614 **Current Mailing Address: New Mailing Address:** 2319 N. CLEVELAND CHICAGO, IL 60614 FEI Number: 31-1565636 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: WOODWARD, MARILYN 431 SE 3RD STREET **BLDG 304** DANIA BEACH, FL 33004 US 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: VDT () Change () Addition () Delete MEISEL, JOE É Name: Name: 513 BOWMAN AVE. Address: Address: City-St-Zip: MADISON, WI 53716 City-St-Zip: Title: PDS () Delete Title: () Change () Addition Name: WOODWARD, CATHERINE Name: Address: 513 BOWMAN AVE. Address: City-St-Zip: MADISON, WI 53716 City-St-Zip: Title: () Delete Title: (X) Change () Addition SENDZIMIR, JAN Name: SENDZIMIR, JAN Name: ROSSAUER LENDE 25/A ROSSAUER LENDE 25/A Address: Address: City-St-Zip: VIENNA, AUSTRIA, A1090 City-St-Zip: VIENNA, AUSTRIA, NA A1090 Title: () Delete Title: (X) Change () Addition Name: NAVARRO, MONICA Name: NAVARRO, MONICA ANTONIO GRANDA CENEND ANTONIO GRANDA CENTENO Address: Address: City-St-Zip: QUITO, ECUADOR, 1306 City-St-Zip: QUITO, ECUADOR, NA 1306

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: CATHERINE L. WOODWARD PDS 05/11/2004