

**2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

**FILED  
Jan 30, 2006  
Secretary of State**

DOCUMENT# N97000003240

Entity Name: CEIBA FOUNDATION FOR TROPICAL CONSERVATION, INC.

**Current Principal Place of Business:**

2319 N. CLEVELAND  
CHICAGO, IL 60614

**New Principal Place of Business:**

**Current Mailing Address:**

2319 N. CLEVELAND  
CHICAGO, IL 60614

**New Mailing Address:**

FEI Number: 31-1565636      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired (X)

**Name and Address of Current Registered Agent:**

WOODWARD, MARILYN  
431 SE 3RD STREET  
BLDG 304  
DANIA BEACH, FL 33004 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: VDT ( ) Delete  
Name: MEISEL, JOE E  
Address: 513 BOWMAN AVE.  
City-St-Zip: MADISON, WI 53716  
  
Title: PDS ( ) Delete  
Name: WOODWARD, CATHERINE  
Address: 513 BOWMAN AVE.  
City-St-Zip: MADISON, WI 53716  
  
Title: D ( ) Delete  
Name: SENDZIMIR, JAN  
Address: ROSSAUER LENDE 25/A  
City-St-Zip: VIENNA, AUSTRIA, NA A1090  
  
Title: D ( ) Delete  
Name: NAVARRO, MONICA  
Address: ANTONIO GRANDA CENTENO  
City-St-Zip: QUITO, ECUADOR, NA 1306

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, 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

01/30/2006

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date