## 2001 UNIFORM BUSINESS REPORT (UBR)

## May 10, 2001 8:00 am<sup>8</sup> Secretary of State DOCUMENT # N98000003189 1. Entity Name INTERNATIONAL WIND SYNTHESIS ASSOCIATION, INC. 05-10-2001 90136 020 \*\*\*\*61.25 Principal Place of Business Mailing Address 200 S BISCAYNE BLVD 100 NORTHEAST THIRD AVENUE SUITE 1100 FORT LAUDERDALE FL 33301 MIAMI FL 33131 2. Principal Place of Business 3. Mailing Address 8 S. COLUMBUS STREET 8 S. COLUMBUS STREET Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For ARUNGTON, VA 65-0851427 ARLINGTON Not Applicable Country Country \$8.75 Additional 5. Certificate of Status Desired 22204 USA AZU Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent AUSTIN, SCOTT R. Street Address (P.O. Box Number is Not Acceptable) 6534 NW 45 WAY AUSTIN, SCOTT R 100 NORTHEAST THIRD AVENUE SUITE 1100 FORT LAUDERDALE FL 33301 Zip Code COCONUT CREEK 33073 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. SIGNATURE (NOTE: Registered Agent signature required when reinstating) printed name of registered agent and title if applicable **FILE NOW:** 9. Election Campaign Financing \$5.00 May Be Make Check Payable to Trust Fund Contribution. Added to Fees Department of State FEE IS \$61.25 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. OFFICERS AND DIRECTORS 11. TITLE Delete TITLE [ ] Change Addition RONKIN, BRUCE NAME NAME ANDERSON, STEPHEN 8 S. COLUMBUS STREET STREET ADDRESS STREET ADDRESS 902 STEARNS HILL ROAD CITY-ST-ZIE ARLINGTON, VA 22204 CITY-ST-ZIP WALTHAM MA 02154 TITLE ☐ Delete TITLE ☐ Change DART, SCOTT NAME NAME STREET ADDRESS 7711 NE 175TH ST. APT D201 STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP BOTHELL WA 98011 TITLE ☐ Delete TITLE ☐ Change ■ Addition PERKINS, DON NAME 🛝 NAME STREET ADDRESS 3156 OAK ROAD #104 STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP **WALNUT CREEK CA 94596** TITLE 🎝 Change Addition Delete TITLE HARRIS, JOHN ALEX RUTHMAN 1001 IRMUNOOD CT., APT. 204 ROCHESTER, MI 48307 STREET ADDRESS 8505 LEMORAN AVENUE STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP PICO RIVERA CA 90660 **VPD** Addition TITLE Delete TITLE Change : VPD NAME ANDERSON, STEPHEN NAME Card Eriksen CIO FRISORMESTER'N , P.O. 660 STREET ADDRESS 8 S COLUMBUS STREET STREET ADDRESS CITY, ST-ZIP ARLINGTON VA 22204 CITY-ST-ZIP 1616 FREDRAKSTAD, NORWAY TITLE Delete TITLE ☐ Change 🖊 Addition METTS, ALLAN NAME Steve Ginn STREET ADDRESS 3564 SCHILLING RIDGE STREET ADDRESS 17443 TAMARON DR CITY-ST-ZIP. DILUTH GA 30136 CITY-ST-ZIP DALLAS TX 75287 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.

FILED

SIGNATURE: SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Date