

# 2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

0017382

DOCUMENT # N99000005742

1. Entity Name  
POLITICAL ECOLOGY SOCIETY, INC.



FILED  
03 DEC 15 AM 8:31  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Principal Place of Business Mailing Address  
UNIVERSITY OF ARIZONA, BUREAU OF APPLIED RESEARCH, ANTHROPOLOGY BLDG., ROOM 316 TUCSON AZ 85721



2. Principal Place of Business 3. Mailing Address  
Suite, Apt. #, etc. Suite, Apt. #, etc.  
City & State City & State

REINSTATEMENT 83

Zip Country Zip Country

4. FEI Number 86-1002595 Applied For Not Applicable

5. Certificate of Status Desired \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent  
MELTZOFF, SARAH  
DIVISION OF MARINE AFFAIRS AND POLICY MAF  
4600 RICKENBACHER CAUSEWAY  
MIAMI FL 33149

7. Name and Address of New Registered Agent  
Name  
Street Address (P.O. Box Number is Not Acceptable)  
City FL Zip Code

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE *R. M. BERLAN - AGENT* *J. Belot* 10/13/03  
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW: FEE IS \$61.25 After September 10, 2003, min will be \$236.25  
9. Election Campaign Financing Trust Fund Contribution. \$5.00 May Be Added to Fees  
Make Check Payable to Florida Department of State

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE	P	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	GREENBERG, JAMES B		NAME		
STREET ADDRESS	340 W CAMINO FAIRHAVEN		STREET ADDRESS		
CITY-ST-ZIP	TUCSON AZ 85704		CITY-ST-ZIP		900023962419 10/21/03--01027--019 **236.25
TITLE	BOD	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	PARK, THOMAS K		NAME		
STREET ADDRESS	6521 W CAMINO LIBBY		STREET ADDRESS		
CITY-ST-ZIP	TUCSON AZ 85718		CITY-ST-ZIP		
TITLE	BOD	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	WEAVER, THOMAS		NAME		
STREET ADDRESS	6644 N DONNA BEATRIX CIRCLE		STREET ADDRESS		
CITY-ST-ZIP	TUCSON AZ 85718		CITY-ST-ZIP		
TITLE	BOD	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	SHERIDAN, THOMAS		NAME		
STREET ADDRESS	15851 W AUBREY AVE		STREET ADDRESS		
CITY-ST-ZIP	ROBLES AZ 85736		CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			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: *[Signature]* REQUIRED 10/13/03 570-621-6316

CR2E037 (4/03)