

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 11, 2008 8:00 am
Secretary of State

03-11-2008 90015 048 *****70.00

DOCUMENT # P32998

1. Entity Name
CLEAN WATER ACTION, INC.



Principal Place of Business
4455 CONNECTICUT AVE, N.W.
SUITE A300
WASHINGTON, DC 20008

Mailing Address
P O BOX 188
MOUNT CLEMENS, MI 48046



2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

02282008 Chg-NP CR2E037 (12/06)

4. FEI Number
23-7128611

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

SCANDIKITO, THERESE E
412 NW 72ND STREET
BOCA RATON, FL 33487

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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

Filing Fee is \$61.25
Due by May 1, 2008

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 PD ☒ Delete
NAME ZWICK, DAVID
STREET ADDRESS 4455 CONNECTICUT AVE, N.W., STE. A300
CITY-ST-ZIP WASHINGTON, DC 20008

TITLE President ☐ Change ☒ Addition
NAME John De Cock
STREET ADDRESS 4455 Connecticut Ave NW A-300
CITY-ST-ZIP Washington DC 20008

TITLE S ☐ Delete
NAME ATERNO, KATHLEEN
STREET ADDRESS 38875 HARPER AVENUE
CITY-ST-ZIP CLINTON TOWNSHIP, MI 48036

TITLE Chair/Director ☐ Change ☒ Addition
NAME David Tykulske
STREET ADDRESS 1401 Walnut Street
CITY-ST-ZIP Montclair, NJ 07042

TITLE D ☒ Delete
NAME FONTENOT, WILLIAM
STREET ADDRESS 632 DREHR
CITY-ST-ZIP BATON ROUGE, LA 70806

TITLE Director ☐ Change ☒ Addition
NAME Michael Gravitz
STREET ADDRESS 4302 Curtis Rd.
CITY-ST-ZIP Chevy Chase MD 20815

TITLE D ☒ Delete
NAME MERRITT, GRANT
STREET ADDRESS 6160 SUMMITT DRIVE
CITY-ST-ZIP MINNEAPOLIS, MN 55430

TITLE Director ☐ Change ☒ Addition
NAME Elizabeth Dickinson
STREET ADDRESS 384 Hall Ave.
CITY-ST-ZIP St. Paul MN 55107

TITLE T ☐ Delete
NAME LOCKWOOD, PETER
STREET ADDRESS ONE THOMAS CIRCLE, N.W.
CITY-ST-ZIP WASHINGTON, DC 20005

TITLE Director ☐ Change ☒ Addition
NAME Paul Costner
STREET ADDRESS 512 County Rd. 2663
CITY-ST-ZIP Eureka Springs, AK 72631

TITLE D ☐ Delete
NAME REDDING, BILL
STREET ADDRESS 214 N HENRY STUIE 203
CITY-ST-ZIP MADISON, WI 53703

TITLE Director ☐ Change ☒ Addition
NAME Maurice Sampson
STREET ADDRESS 129 W. Gorgas Ln.
CITY-ST-ZIP Philadelphia PA 19119

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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: *Kaul Eaton*, Corp. Secretary

3/5/08

586-783-3277

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #