2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 29, 2006
Secretary of State

DOCUMENT# P35491

Entity Name: ACCION INTERAMERICA, INC.

Current Principal Place of Business:

56 ROLAND STREET
300
BOSTON, MA 02129

New Principal Place of Business:

Current Mailing Address:

56 ROLAND STREET
300
BOSTON, MA 02129

New Mailing Address:

FEI Number: 13-2535763 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

GOMEZ, LUZ
111 SW 5TH AVE
MIAMI, FL 33130 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:	PCEO	( ) Delete
Name:	OTERO, MARIA	
Address:	56 ROLAND STREET	
City-St-Zip:	BOSTON, MA 02129	
Title:	VCFO	( ) Delete
Name:	QUENSE, CATHERINE	
Address:	56 ROLAND STREET	
City-St-Zip:	BOSTON, MA 02129	
Title:	C	( ) Delete
Name:	TRUITT, NANCY SHERWOOD	
Address:	55 E. 59TH STREET	
City-St-Zip:	NEW YORK, NY 10022	
Title:	VC	( ) Delete
Name:	SCOTT, JOHN W	
Address:	40 LYDECKER STREET	
City-St-Zip:	ENGLEWOOD, NJ 07631	
Title:	S/D	( ) Delete
Name:	FAUCETT, RUSSELL B	
Address:	604 24TH STREET	
City-St-Zip:	SANTA MONICA, CA 90402	

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:	
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 QUENSE VCFO 03/29/2006

Electronic Signature of Signing Officer or Director — Date