2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 09, 2001 8:00 am
Secretary of State
02-15-2001 90051 045 ****61.25

DOCUMENT # P38074

1. Entity Name

CENTER FOR MARINE CONSERVATION, INC.

Principal Place of Business	Mailing Address
1725 DESALES ST., NW SUITE 600 WASHINGTON DC 20036 US	1725 DESALES ST., NW SUITE 600 WASHINGTON DC 20036 US

29414 [redacted]

DO NOT WRITE IN THIS SPACE

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

4. FEI Number 23-7245152 ☐ Applied For ☐ Not Applicable

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

6. Name and Address of Current Registered Agent

GERALD M. LEONARD
ONE BECH DRIVE SE, SUITE 304
ST PETERSBURG FL 33701

7. Name and Address of New Registered Agent

Name: David J. White
Street Address (P.O. Box Number is Not Acceptable): 449 Central Avenue Suite 200
City: st. Petersburg FL Zip Code: 33701

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: See 2000 UBR for signature — DATE: 3/2/01
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

FILE NOW: FEE IS $61.25	9. Election Campaign Financing Trust Fund Contribution. ☐ $5.00 May Be Added to Fees	Make Check Payable to Department of State

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DC BOHLEN, CURTIS E.U. 4710 QUEBEC STREET, NW WASHINGTON DC 20016	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Director	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DTC GRESH, PHILIP M. 1140 WEST BRYN MAWR AVENUE ITASCA IL 60143	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D GRANZOW, SANDRA 2237 Q ST., NW WASHINGTON DC 20008	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VicecChair Susan Martin One 5th Ave., Apt. 20C New York, NY 10003	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DS CAMERSON, SANDERS 3117 35TH STREET, NW WASHINGTON DC 20016	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition

CR2E037 (10/00)

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] Peter M. Jones — 2/9/01 — (202)429-5609
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #