

FILED
May 09, 2000 8:00 am
Secretary of State

05-09-2000 90134 015 ***158.75

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # p99000005390			
1. Entity Name U.S. ENERGY CONSERVATION COALITION			
Principal Place of Business 8222 WILES ROAD, #210 CORAL SPRINGS, FL 33067		Mailing Address SAME	
2. Principal Place of Business 146 NW 84TH WAY Suite, Apt. #, etc.		3. Mailing Address SAME Suite, Apt. #, etc.	
City & State CORAL SPRINGS, FL		City & State	
Zip 33071	Country BROWARD	Zip	Country
4. FBI Number 65-0884884		Applied For Not Applicable	
5. Certificate of Status Desired ☒		\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent LEWIS HILLER 146 NW 84TH WAY CORAL SPRINGS, FL 33071			
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. SIGNATURE <u>Lewis Hiller</u> DATE <u>4/14/2000</u> Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)			
9. This corporation is eligible to satisfy its intangible tax filing requirement and elects to do so. (See criteria on back) ☐		10. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees	
11. OFFICERS AND DIRECTORS TITLE NAME STREET ADDRESS CITY - ST - ZIP P D LEWIS HILLER 146 NW 84TH WAY CORAL SPRINGS, FL 33071 ☐ Delete		12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TITLE NAME STREET ADDRESS CITY - ST - ZIP Director Arthur Kachel 3850 S. University Dr. Davie FL 33329 ☐ Change ☒ Addition	
TITLE NAME STREET ADDRESS CITY - ST - ZIP ☐ Delete		TITLE NAME STREET ADDRESS CITY - ST - ZIP ☐ Change ☐ Addition	
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13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(l), 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 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered. SIGNATURE: <u>Lewis Hiller</u> DATE <u>4/14/2000</u> SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #			