2024 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N19000012539

Entity Name: ANTHROPOCENE ALLIANCE, INC.

Current Principal Place of Business:

105 NE BAY AVENUE MICANOPY, FL 32667

Current Mailing Address:

105 NE BAY AVENUE MICANOPY, FL 32667 US

FEI Number: 81-5166043

Name and Address of Current Registered Agent:

LAHART, MARCY 207 S.E. TUSCAWILLA ROAD MICANOPY, FL 32667 US

Date

Certificate of Status Desired: Yes

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

Officer/Director Detail :

| Title | TREASURER | Title | SECRETARY |
|-----------------|-----------------------------|-----------------|---------------------------|
| Name | PANDYA, RAJ | Name | SKARFORD, SUSIE |
| Address | 4017 WONDERLAND HILL AVENUE | Address | 8150 FLORAL AVENUE |
| City-State-Zip: | BOULDER CO 80304 | City-State-Zip: | SKOKIE IL 60077 |
| Title | PRESIDENT | Title | CHAIRMAN |
| | - | | - |
| Name | FESTING, HARRIET | Name | COFFEE, JOYCE |
| Address | 105 NE BAY AVENUE | Address | 1447 N. OAKLEY BLVD. 1447 |
| City-State-Zip: | MICANOPY FL 32667 | City-State-Zip: | CHICAGO IL 60622 |
| | | | |
| Title | COO | | |
| Name | SMITH, MICHELLE | | |
| Address | 831 MARIAN ANDERSON AVENUE | | |
| City-State-Zip: | PORT ARTHUR TX 77640 | | |
| | | | |

I hereby 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 all other like empowered.

SIGNATURE: MICHELLE SMITH

CHIEF OPERATIONS OFFICER 03/20/2024

Electronic Signature of Signing Officer/Director Detail

Date