


2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Aug 22, 2008 8:00 am
Secretary of State

08-22-2008 90001 013 ****61.25

DOCUMENT # F03000005639			
1. Entity Name EARTH FORCE, INC.			
Principal Place of Business 1908 MOUNT VERNON AVENUE 2ND FLOOR ALEXANDRIA, VA 22301		Mailing Address 1908 MOUNT VERNON AVENUE 2ND FLOOR ALEXANDRIA, VA 22301	
2. Principal Place of Business - No P.O. Box # 2120 W. 33RD AVE Suite, Apt. #, etc.		3. Mailing Address 301 PENINSULA DR SUITE 5 Suite, Apt. #, etc.	
City & State DENVER CO		City & State ERIE PA	
Zip 80211		Country US	
4. FEI Number 52-1830873		Applied For Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required			
6. Name and Address of Current Registered Agent NOE, CHRISTOPHER 10360 CARROLLWOOD LANE UNIT 218 TAMPA, FL 33618		7. Name and Address of New Registered Agent Name SCOTT WILLIS Street Address (P.O. Box Number is Not Acceptable) 734 PLACIDO WAY NE City ST PETERSBURG FL Zip Code 33704	
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 SCOTT WILLIS		DATE 8-6-08	
Filing Fee is \$61.25 Due by September 12, 2008		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$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 NAME STREET ADDRESS CITY-ST-ZIP	PRES MELDRUM, VINCE 1908 MOUNT VERNON AVENUE, 2ND FLOOR ALEXANDRIA, VA 22301 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	PRES SEC STANLEY M. KROH PO BOX 111 TAMPA FL 33601 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DIR BATES, CHRISTINE 1996 TECHNOLOGY DRIVE TROY, MI 480834243 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	VICE PRES <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DIR MACGREGOR, JAMES 200 WATER STREET, PH-06 NEW YORK, NY 10038 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	PRES <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DIR KOHLMOOS, JAMES W 1718 CONNECTICUT AVE., N.W., SUITE 700 WASHINGTON, DC 20009 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	TREAS JIMMY L. MILLER JR 3473 W. 32ND AVE DENVER CO 80211 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	EDIR BARDWELL, LISA PH.D. 2555 WEST 34TH AVE DENVER, CO 80211 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	CEO <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DIR FRYMOYER, BILL 2100 M STREET, NW, #200 WASHINGTON, DC 20037 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	DIR DR. TERRY WILSON 131 JONES - JAGGERS HALL BIG RED WAY BOWLING GREEN KY 42101 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
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: <i>Spennette Marshall MSB</i>		SEE ATTACHMENT	
		8-11-08	

ATTACHMENT

EARTH FORCE, INC.
52-1830873

40114062
#F03000005639

Individual responsible for custody of funds and financial records; authorized to sign checks

Annette Marshall, OSB, Director of Administration
301 Peninsula Drive , Suite #5
Erie, PA 16505