

FILE NOW: FILING FEE AFTER MAY 1 IS \$155.00

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

95 FEB -1 PM 1:57

DOCUMENT # P31260 (3)

1. Corporation Name
SIERRA CLUB LEGAL DEFENSE FUND, INC.

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified 09/06/1990
3a. Date of Last Report 03/15/1994
4. FEI Number 94-1730465
Applied For Not Applicable

5. Certificate of Status Desired \$6.75 Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution \$5.00 May Be Added to Fees

7. Nonprofit with IRS 501(c)(3) Tax Exempt Status \$68.75 Supplemental Fee Not Required

8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes Yes No

2. Principal Place of Business		2a. Mailing Address	
21	180 MONTGOMERY STREET SUITE 1400 SAN FRANCISCO CA 94104	26	180 MONTGOMERY STREET SUITE 1400 SAN FRANCISCO CA 94104
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
22		27	
City & State		City & State	
23		28	
Zip	Country	Zip	Country
24	25	29	30

9. Name and Address of Current Registered Agent
GUEST, DAVID G.
111 S. MARTIN LUTHER KING, JR. BLVD.
TALLAHASSEE FL 32301

10. Name and Address of New Registered Agent
B1 Name
B2 Street Address (P.O. Box Number is Not Acceptable)
B3
B4 City FL B5 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE _____ (NOTE: Registered Agent signature required when reappointing) DATE _____

12. OFFICERS AND DIRECTORS

TITLE	V
NAME	VARENCHIK, FRANKLIN S.
STREET ADDRESS	180 MONTGOMERY STREET, #1400
CITY-ST-ZIP	SAN FRANCISCO CA
TITLE	VCD
NAME	WAYBURN, CYNTHIA
STREET ADDRESS	2441 EVERGREEN POINT RD
CITY-ST-ZIP	BELLEVEUE WA
TITLE	CD
NAME	GREENBERG, DANIEL B.
STREET ADDRESS	6060 SEPULVEDA BOULEVARD
CITY-ST-ZIP	VAN NUYS CA
TITLE	SD
NAME	MOODY, LINDA A.
STREET ADDRESS	62 PRINCESS STREET
CITY-ST-ZIP	SAUSALITO CA
TITLE	TD
NAME	HARRIS, H. DONALD JR
STREET ADDRESS	400 CAPITOL MALL, SUITE 2300
CITY-ST-ZIP	SACRAMENTO CA
TITLE	D
NAME	BOWER, PAUL G.
STREET ADDRESS	2029 CENTURY PARK E 4100
CITY-ST-ZIP	LOS ANGELES CA

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY-ST-ZIP	
2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY-ST-ZIP	
3.1 TITLE	Director <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY-ST-ZIP	
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY-ST-ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(3)(k), Florida Statutes, I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: [Signature] 1/13/95 (415) 627-6700
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR (Date) (Corporate Name #)