

FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT 1996



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

DOCUMENT # **P31260** (3)

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



Principal Place of Business: **180 MONTGOMERY STREET SUITE 1400 SAN FRANCISCO CA 94104**
Mailing Address: **180 MONTGOMERY STREET SUITE 1400 SAN FRANCISCO CA 94104**

3. Date Incorporated or Qualified: **09/06/1990**
3a. Date of Last Report: **02/01/1995**
4. FEI Number: **94-1730465**
Applied For: Not Applicable
5. Certificate of Status Desired: **\$8.75 Additional Fee Required**
6. Election Campaign Financing Trust Fund Contribution: **\$5.00 May Be Added to Fees**
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes: Yes No

21. Principal Place of Business: Suite, Apt. #, etc.
22. City & State
23. Zip
24. Country
25. Country
26. Mailing Address: Suite, Apt. #, etc.
27. City & State
28. Zip
29. Country
30. Country

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
81. Name
82. Street Address (P.O. Box Number is Not Acceptable)
83.
84. City
85. Zip Code: **FL**

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, 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 617.0503, Florida Statutes.

SIGNATURE: _____ (NOTE: Registered Agent's signature required when re-registering) DATE: _____

12. OFFICERS AND DIRECTORS

TITLE	V	<input type="checkbox"/> DELETE
NAME	VARENCHIK, FRANKLIN S.	
STREET ADDRESS	180 MONTGOMERY STREET, #1400	
CITY, ST, ZIP	SAN FRANCISCO CA	
TITLE	VCD	<input type="checkbox"/> DELETE
NAME	WAYBURN, CYNTHIA	
STREET ADDRESS	2441 EVERGREEN POINT RD	
CITY, ST, ZIP	BELLEVUE WA	
TITLE	D	<input type="checkbox"/> DELETE
NAME	GREENBERG, DANIEL B.	
STREET ADDRESS	6060 SEPULVEDA BOULEVARD	
CITY, ST, ZIP	VAN NUYS CA	
TITLE	SD	<input type="checkbox"/> DELETE
NAME	MOODY, LINDA A.	
STREET ADDRESS	62 PRINCESS STREET	
CITY, ST, ZIP	SAUSALITO CA	
TITLE	TD	<input type="checkbox"/> DELETE
NAME	HARRIS, H. DONALD JR	
STREET ADDRESS	400 CAPITOL MALL, SUITE 2300	
CITY, ST, ZIP	SACRAMENTO CA	
TITLE	D	<input type="checkbox"/> DELETE
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 1996

11. TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
12. NAME	
13. STREET ADDRESS	
14. CITY - ST - ZIP	
21. TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
22. NAME	
23. STREET ADDRESS	
24. CITY - ST - ZIP	
31. TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
32. NAME	
33. STREET ADDRESS	
34. CITY - ST - ZIP	
41. TITLE	Director/Trustee <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
42. NAME	
43. STREET ADDRESS	
44. CITY - ST - ZIP	
51. TITLE	Director/Trustee <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
52. NAME	
53. STREET ADDRESS	
54. CITY - ST - ZIP	
61. TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
62. NAME	
63. STREET ADDRESS	
64. 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 119.07(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: *F.S. Varenchik* **F.S. VARENCHIK** 1/19/96 (415) 627-6700
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E037 (12/95)