

**2017 FOREIGN NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P33290

**Entity Name:** EARTHSHARE, INC.

**Current Principal Place of Business:**

7735 OLD GEORGETOWN ROAD  
SUITE 900  
BETHESDA, MD 20814

**Current Mailing Address:**

7735 OLD GEORGETOWN ROAD  
SUITE 900  
BETHESDA, MD 20814

**FEI Number:** 52-1601960

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

REGISTERED AGENTS INC.  
3030 N. ROCKY POINT DR.  
STE 150A  
TAMPA, FL 33607 US

*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:** ZACHARY KNOWLTON

01/30/2017

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title DIRECTOR  
Name HITCHCOCK, ELIZABETH  
Address 1748 N STREET NW  
City-State-Zip: WASHINGTON DC 20036

Title SECRETARY  
Name WERNER, LYNN  
Address 150 KENT ROAD  
City-State-Zip: CORNWALLBRIDGE CT 06475

Title CHAIR  
Name CARLSON, MARK  
Address 407 BROAD AXE ROAD  
City-State-Zip: CHARLOTTESVILLE VA 22903

Title DIRECTOR  
Name FURRY, DEB  
Address 745 BERWICK COURT  
City-State-Zip: LAKE OSWEGO OR 97034

Title TREASURER  
Name REED, MARCI  
Address 113 PEACHTREE STREET, NE FL2  
City-State-Zip: ATLANTA GA 30303

Title VICE CHAIR  
Name WOIWODE, TOM  
Address 333 W. FORT STREET  
SUITE 2010  
City-State-Zip: DETROIT MI 48226

Title DIRECTOR  
Name CURTIS, MARIE  
Address 7 ROBIN DRIVE  
City-State-Zip: OAKHURST NJ 07755

Title DIRECTOR  
Name FELDMAN, JAY  
Address 701 E STREET SE  
SUITE 200  
City-State-Zip: WASHINGTON DC 20003

**Continues on page 2**

*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:** MARK CARLSON

BOARD CHAIR

01/30/2017

Electronic Signature of Signing Officer/Director Detail

Date

**Officer/Director Detail Continued :**

Title           DIRECTOR  
Name           GRAY, ALAN  
Address        1600 GAYLOR ST, SE  
City-State-Zip: SMYRNA GA 30082

Title           DIRECTOR  
Name           PAUL, LAMBERT  
Address        4 EAGLE NEST RD  
City-State-Zip: CHELMSFORD MA 01824

Title           DIRECTOR  
Name           MARTIN, ROSEN  
Address        70 LANCASTER AVE  
City-State-Zip: KENTFIELD CA 94904