

1.) CORPORATION NAME:

Clean Water Action

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS: **B.E.**

AUTH IN VI

HUBCO REGISTERED AGENT SERVICES, INC.

2331 MILL ROAD

SUITE 100

ALEXANDRIA, VA 22314

3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

ALEXANDRIA CITY

4.) STATE OR COUNTRY OF INCORPORATION:

DC

DUE DATE: **9/30/2011**

SCC ID NO: **F0304909**

5.) STOCK INFORMATION

CLASS	AUTHORIZED
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6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 1010 VERMONT AVE, NW
SUITE 400

CITY/ST/ZIP: WASHINGTON, DC 20005-

7.) DIRECTORS AND PRINCIPAL OFFICERS: All directors and principal officers must be listed. An individual may be designated as both a director and an officer.

NAME: KATHLEEN E ATERNO
TITLE: SECRETARY
ADDRESS: 23885 DENTON STE B
CITY/ST/ZIP/CO: CLINTON TOWNSHIP, MI 48036-

OFFICER DIRECTOR

NAME: BRANT BAESLACK
TITLE: DIRECTOR
ADDRESS: 20 MONTVALE ST
CITY/ST/ZIP/CO: BRADFORD, MA 01835-

OFFICER DIRECTOR

NAME: PAT COSTNER
TITLE: DIRECTOR
ADDRESS: 512 COUNTY ROAD 2663
CITY/ST/ZIP/CO: EUREKA SPRINGS, AK 72631-

OFFICER DIRECTOR

NAME: MICHAEL GRAVITZ
TITLE: DIRECTOR
ADDRESS: 4302 CURTIS RD
CITY/ST/ZIP/CO: CHEVY CHASE G, MD 20815-

OFFICER DIRECTOR

NAME: ROBERT WENDELGASS
TITLE: PRESIDENT
ADDRESS: 1010 VERMONT AVE NW
SUITE 400
CITY/ST/ZIP/CO: WASHINGTON, DC 20005-

OFFICER DIRECTOR

NAME: PETER LOCKWOOD TITLE: TREASURER ADDRESS: ONE THOMAS CIRCLE NW SUITE 1100 CITY/ST/ZIP/CO: WASHINGTON, DC 20005-	<input checked="" type="checkbox"/> OFFICER <input checked="" type="checkbox"/> DIRECTOR
NAME: TAYNA CARTER TITLE: ASST SECRETARY ADDRESS: 23885 DENTON SUITE B CITY/ST/ZIP/CO: CLINTON TWP, MI 48036-	<input checked="" type="checkbox"/> OFFICER <input type="checkbox"/> DIRECTOR
NAME: WILLIAM GOLDSMITH TITLE: DIRECTOR ADDRESS: 1620 FEDERAL ST CITY/ST/ZIP/CO: PHILADELPHIA, PA 19146-3014	<input type="checkbox"/> OFFICER <input checked="" type="checkbox"/> DIRECTOR
NAME: MAXINE LIPELES TITLE: DIRECTOR ADDRESS: ONE BROOKINGS DR CITY/ST/ZIP/CO: ST LOUIS, MO 63130-4899	<input type="checkbox"/> OFFICER <input checked="" type="checkbox"/> DIRECTOR
NAME: MYRNA POTICHA TITLE: DIRECTOR ADDRESS: 6863 E EASTMAN AVE CITY/ST/ZIP/CO: DENVER, CO 80224-	<input type="checkbox"/> OFFICER <input checked="" type="checkbox"/> DIRECTOR
NAME: MAURICE SAMPSON TITLE: DIRECTOR ADDRESS: 129 W GORGAS LN CITY/ST/ZIP/CO: PHILADELPHIA, PA 19119-	<input type="checkbox"/> OFFICER <input checked="" type="checkbox"/> DIRECTOR
NAME: ELIZABETH DICKINSON TITLE: DIRECTOR ADDRESS: 384 HALL AVE CITY/ST/ZIP/CO: ST PAUL, MN 55107-	<input type="checkbox"/> OFFICER <input checked="" type="checkbox"/> DIRECTOR
NAME: DAVID TYKULSKER TITLE: CHAIRMAN ADDRESS: 161 WALNUT ST CITY/ST/ZIP/CO: MONTCLAIR, NJ 07042-	<input checked="" type="checkbox"/> OFFICER <input checked="" type="checkbox"/> DIRECTOR
I AFFIRM THAT THE INFORMATION CONTAINED IN THIS ELECTRONIC REPORT IS ACCURATE AND COMPLETE AS OF THE DATE BELOW AND THAT I AM LEGALLY AUTHORIZED TO SIGN THIS REPORT.	
<u>/s/ TAYNA CARTER</u> SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT	TAYNA CARTER, ASST <u>SECRETARY</u> PRINTED NAME AND CORPORATE TITLE
<u>9/14/2011</u> DATE	
It is a Class 1 misdemeanor for any person to sign a document, which includes this electronic record, that is false in any material respect with the intent that the document be delivered to the Commission for filing.	