

1.) CORPORATION NAME:

**International Seafood Sustainability Foundation, Inc.**  
 2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:  
**CORPORATION SERVICE COMPANY**  
**Bank of America Center, 16th Floor**  
**1111 East Main Street**

DUE DATE: **2/28/2014**

SCC ID NO: **F1781451**

5.) STOCK INFORMATION

CLASS	AUTHORIZED
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**RICHMOND, VA**

3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

**RICHMOND CITY**

4.) STATE OR COUNTRY OF INCORPORATION:

**DE**

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 805 15th Street, NW  
Suite 650

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:	JOHN CONNELLY	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	SECRETARY		
ADDRESS:	805 15th Street, NW Suite 650		
CITY/ST/ZIP/CO:	Washington, DC 20005		

NAME:	SUSAN JACKSON	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	PRESIDENT		
ADDRESS:	805 15th Street, NW Suite 650		
CITY/ST/ZIP/CO:	Washington, DC 20005		

NAME:	WILLIAM FOX	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	VICE CHAIRMAN		
ADDRESS:	1250 24TH STREET NW		
CITY/ST/ZIP/CO:	WASHINGTON, DC 20037		

NAME:	MIGUEL JORGE	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	1145 17TH STREET NW		
CITY/ST/ZIP/CO:	WASHINGTON, DC 20036		

NAME:	VICTOR RESTREPO	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	805 15th Street. MW Suite 650		
CITY/ST/ZIP/CO:	Washington, DC 20005		

NAME: ALFRED SCHUMM TITLE: DIRECTOR ADDRESS: INTERNATIONAL WWF CENTRE MARINE CONSERVATION CITY/ST/ZIP/CO: , , FN	<input type="checkbox"/> OFFICER <input checked="" type="checkbox"/> DIRECTOR	
NAME: Juan Corrales TITLE: CHAIRMAN ADDRESS: OL. Ind Lamiaran-Aranburu CITY/ST/ZIP/CO: Mundaka, 48360, SV	<input type="checkbox"/> OFFICER <input checked="" type="checkbox"/> DIRECTOR	
NAME: Victor Restrepo TITLE: DIRECTOR ADDRESS: 805 15th Street, NW CITY/ST/ZIP/CO: Suite 650 Washington, DC 20005	<input type="checkbox"/> OFFICER <input checked="" type="checkbox"/> DIRECTOR	
NAME: Javier Garat TITLE: DIRECTOR ADDRESS: C/Velazquez, 41 4 C CITY/ST/ZIP/CO: Madrid, 28001, ES	<input 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.		
/s/ JOHN CONNELLY SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT	JOHN CONNELLY, SECRETARY PRINTED NAME AND CORPORATE TITLE	2/27/2014 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.		