

FILE NOW: FILING FEE IS \$61.25

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NONPROFIT CORPORATION ANNUAL REPORT 1996



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

DOCUMENT # **837474** (6)

1. Corporation Name
AUTISM SOCIETY OF AMERICA, INC.



Principal Place of Business Mailing Address

**7910 WOODMONT AVE.
SUITE 650
BETHESDA MD 20814**

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SUITE 650
BETHESDA MD 20814**

3. Date Incorporated or Qualified **12/02/1976** 3a. Date of Last Report **04/12/1995**

21	2. Principal Place of Business	2a. Mailing Address	4. FEI Number	Applied For
22	Suite, Apt. #, etc.	Suite, Apt. #, etc.	52-1020149	Not Applicable
23	City & State	City & State	5. Certificate of Status Desired	<input type="checkbox"/> \$8.75 Additional Fee Required
24	Zip	Zip	6. Election Campaign Financing Trust Fund Contribution	<input type="checkbox"/> \$5.00 May Be Added to Fees
25	Country	Country	8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes	<input type="checkbox"/> Yes <input type="checkbox"/> No

9. Name and Address of Current Registered Agent		10. Name and Address of New Registered Agent	
ROSEN, JACQUELYN 1914 FINN HILL DRIVE LANTANA FL 33462		81 Name	
		82 Street Address (P.O. Box Number is Not Acceptable)	
		83	900001865599 -06/18/96--01116--021
		84 City	***61.25 FL
		85 Zip Code	

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 _____ DATE _____
(NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	P	1.1 TITLE	Immediate Past President (D) <input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	ROSEN, JACQUELYN	1.2 NAME	Jacquelyn Rosen
STREET ADDRESS	1914 FINN HILL DRIVE	1.3 STREET ADDRESS	1914 Finn Hill Drive
CITY-ST-ZIP	LANTANA FL	1.4 CITY-ST-ZIP	Lantana, FL 33462
TITLE	S	2.1 TITLE	3rd Vice President (D) <input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	GERHARDT, PETER	2.2 NAME	Peter Gerhardt
STREET ADDRESS	213 NASSAU STREET	2.3 STREET ADDRESS	213 Nassau Street
CITY-ST-ZIP	PRINCETON NJ	2.4 CITY-ST-ZIP	Princeton, NJ 08540
TITLE	TVP	3.1 TITLE	Director (D) <input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	HORNE, AUDREY	3.2 NAME	Audrey Horne
STREET ADDRESS	P. O. BOX 6	3.3 STREET ADDRESS	110 Bryant Street, Po Box 6
CITY-ST-ZIP	ST. GEORGE SC	3.4 CITY-ST-ZIP	St. George, SC 29477
TITLE	T	4.1 TITLE	1st Vice President (D) <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	SACK, JAMES	4.2 NAME	James Sack
STREET ADDRESS	8000 TOWERS CRESCENT DR. #1040	4.3 STREET ADDRESS	8300 Greensboro Drive #1080
CITY-ST-ZIP	BIENNA VA	4.4 CITY-ST-ZIP	McLean, VA 22102
TITLE	FVP	5.1 TITLE	President (P) <input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	KOWNACKI, SANDRA	5.2 NAME	Sandra Kownacki
STREET ADDRESS	1653 TWIN OAKS DR	5.3 STREET ADDRESS	1653 Twin Oaks Drive
CITY-ST-ZIP	ARNOLD MO	5.4 CITY-ST-ZIP	Arnold, MO 63010
TITLE	PP	6.1 TITLE	Treasurer (T) <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	RAMSEY, SALLY W	6.2 NAME	Elizabeth Roth
STREET ADDRESS	1857 N. HOLBROOK ST.	6.3 STREET ADDRESS	4125 Queen Mary Drive
CITY-ST-ZIP	ANANHEIM CA	6.4 CITY-ST-ZIP	Olney, MD 20832

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: Elizabeth M. Roth Elizabeth Roth 5-19-96 301-657-0821
DATE: _____ DAYTIME PHONE: _____

CR2E037 (12/95)

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Autism Society of America

BOARD OF DIRECTORS 1995-1996

PRESIDENT

Sandra Kownacki
1653 Twin Oaks Drive
Arnold, MO 63010
(314) 296-3981 (h)
(314) 892-2250 (w)\(314) 287-3981 Fax

IMMEDIATE PAST PRESIDENT

Jacquelyn Rosen
1914 Finn Hill Drive
Lantana, FL 33462
(407) 586-4839 (h)
(407) 391-1504 (w)\(407) 586-7520 Fax

1ST VICE PRESIDENT

James Sack
Sack & Associates
8300 Greensboro Dr., #1080
McLean, VA 22102
(703) 780-3581 (h)
(703) 883-0102 (w)\(703) 883-0108 Fax

2ND VICE PRESIDENT

John Maltby
10 Millard Avenue
N. Tarrytown, NY 10591
(914) 631-0105 (h)
(203) 861-3307 (w)\(203) 861-3317 Fax

3RD VICE PRESIDENT

Peter Gerhardt
213 Nassau Street
Princeton, NJ 08540
(609) 683-8925 (h)
(609) 987-2314 (w)\(609) 734-0069 Fax

SECRETARY

Jerri Jacobs
1207 S. 45th Avenue
Yakima, WA 98908
(509) 966-0625 (h)
(509) 966-3546 Fax

TREASURER

Elizabeth Roth
4125 Queen Mary Drive
Olney, MD 20832
(301) 924-2211 (h)\(301) 924-2222 Fax

BOARD MEMBERS:

Ronald Kallen
353 Lakeside Place
Highland Park, IL 60035
(708) 432-5859 (h)
(708) 696-5578 (w)
(708) 318-2325 Fax

Audrey Horne
110 Bryant Street, PO Box 6
St. George, SC 29477
(803) 563-4567 (h)
(803) 563-6164 Fax

Diana Daggett
1800 Valdez Drive, NE
Albuquerque, NM 87112
(505) 291-9738 (h)
(505) 296-1878 (w)
(505) 271-2275 Fax

Anne Struthers
130 South Avenue
Alamo, CA 94507
(510) 837-1665 (h)
(510) 837-6453 (Fax)

Lee Grossman
264 Dowsett Avenue
Honolulu, HA 96817
(808) 595-3721 (h)
(808) 595-7212 (Fax)

Carl Daisy
37785 Greenwood Drive W.
Northville, MI 48167
(810) 471-3379 (h/Fax)
(800) 537-0009 (w)

Lawrence Brennan
72 Rose Avenue
Woodcliff Lake, NJ 07675
(201) 391-8316 (h)
(201) 782-0420 (Fax)

Revised 1/22/95