2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F06000006102

Entity Name: AUTISM SPEAKS INC.

FILED May 01, 2012 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

2 PARK AVENUE 11TH FL NEW YORK, NY 10016

Current Mailing Address: New Mailing Address:

1060 STATE ROAD 2ND FLOOR PRINCETON, NJ 08540

FEI Number: 20-2329938 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

NATIONAL CORPORATE RESEARCH, LTD. 155 OFFICE PLAZA DRIVE TALLAHASSEE, FL 32301 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:

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: CF

Name: WRIGHT, ROBERT C

Address: 30 ROCKEFELLER PLAZA 52ND FLOOR

City-St-Zip: NEW YORK, NY 10112

Title: CF

Name: WRIGHT, SUZANNE
Address: 610 FIFTH AVE SUITE 604
City-St-Zip: NEW YORK, NY 10020

Title: F

Name: ROITHMAYR, MARK
Address: 2 PARK AVENUE 11TH FL
City-St-Zip: NEW YORK, NY 10016

Title: ST

Name: GEIER, PHILIP

Address: 70 E 55TH STREET 15TH FLOOR

City-St-Zip: NEW YORK, NY 10022

Title: EVP

Name: BELL, PETER

Address: 1060 STATE ROAD, 2ND FLOOR

City-St-Zip: PRINCETON, NJ 08540

Title: CFO

Name: HETZEL, TOM

Address: 1060 STATE ROAD, 2ND FLOOR City-St-Zip: PRINCETON, NJ 08540

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 ROITHMAYR P 05/01/2012