

2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000009800

FILED
Apr 29, 2010
Secretary of State

Entity Name: SYDNEY'S ANGELS FOR AUTISM, INC.

Current Principal Place of Business:

6536 STONINGTON DRIVE
TAMPA, FL 33647 US

New Principal Place of Business:

Current Mailing Address:

6536 STONINGTON DRIVE
TAMPA, FL 33647 US

New Mailing Address:

FEI Number: 83-0409962

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SWENSON, JEFFREY T
3101 W MARTIN LUTHER KING BLVD STE #200
TAMPA, FL 33607 US

Name and Address of New Registered Agent:

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: P
Name: SIENIKIEWICZ, FRANK
Address: 6910 SPANISH MOSS CIR.
City-St-Zip: TAMPA, FL 33625

Title: VP
Name: SUBLETT, MAGNUS
Address: ONE PROGRESS PLAZA SUITE 50
City-St-Zip: ST. PETERSBURG, FL 33701

Title: T
Name: REYNOLDS, LINDA
Address: 6910 SPANISH MOSS CIR.
City-St-Zip: TAMPA, FL 33625

Title: S
Name: FILUTA, EMILY
Address: 16120 SUNCREST SHORES
City-St-Zip: ODESSA, FL 33556

Title: DE
Name: SWENSON, KATHY
Address: 6536 STONINGTON DR.
City-St-Zip: TAMPA, FL 33647

Title: D
Name: WOOTEN-RAVA, JENNIFER
Address: 9 DAHLIA COURT
City-St-Zip: HOMOSASSA, FL 34446

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: FRANK SIENIKIEWIEZ

P

04/29/2010

Electronic Signature of Signing Officer or Director

Date