## 2021 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

#### DOCUMENT# N0300006053

Entity Name: NATIONAL AUTISM ASSOCIATION, INC.

## **Current Principal Place of Business:**

ONE PARK AVENUE SUITE 1 PORTSMOUTH, RI 02871

## **Current Mailing Address:**

ONE PARK AVENUE SUITE 1 PORTSMOUTH, RI 02871 US

## FEI Number: 20-0032380

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

HOCHWARTER, TERRY 1280 CONSERVANCY DR. E TALLAHASSEE, FL 32312 US

Certificate of Status Desired: Yes

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

#### Officer/Director Detail :

Title	ED	Title	PD
Name	HIGGINS, KRYSTAL	Name	FOURNIER, WENDY
Address	7 HERITAGE RD	Address	66 WILKEY AVE
City-State-Zip:	BARRINGTON RI 02806	City-State-Zip:	PORTSMOUTH RI 02871
Title	TREASURER	Title	S
Title Name	TREASURER DUBROWSKI, ROSEMARIE	Title Name	S BOTHWELL, CLAIRE M
			-

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: WENDY FOURNIER

PRESIDENT

02/03/2021

Date

Electronic Signature of Signing Officer/Director Detail

# FILED Feb 03, 2021 Secretary of State 2931462693CC