

2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000003749

Entity Name: ASSOCIATION FOR SOFTWARE TESTING, INC.**Current Principal Place of Business:**1285 DOUGLAS ST. SE
PALM BAY, FL 32909**Current Mailing Address:**1285 DOUGLAS ST. SE
PALM BAY, FL 32909 US**FEI Number:** 20-1010345**Certificate of Status Desired:** Yes**Name and Address of Current Registered Agent:**HAYNES, DAWN
1285 DOUGLAS ST. SE
PALM BAY, FL 32909 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**Officer/Director Detail :**

Title VP
Name MOREIRA, ALESSANDRA
Address 57 READE ST
APT 21A
City-State-Zip: NEW YORK NY 10007

Title DIRECTOR
Name DAVIS, ERIK
Address 1727 BARLOW RD
City-State-Zip: HUDSON OH 44236

Title SECRETARY
Name JACKSON, ROXANE L.
Address 13337 BLAZEY TRAIL
City-State-Zip: STRONGSVILLE OH 44136

Title DIRECTOR
Name BANTZ, ALEXANDER
Address 7155 HUNTINGTON RD
City-State-Zip: INDIANAPOLIS IN 46240

Title PRESIDENT
Name ROHRMAN, JUSTIN
Address 211 COPLEY LN
City-State-Zip: NASHVILLE TN 37204

Title TREASURER
Name PROEGLER, ERIC
Address 1370 MONTECITO AVE # B
City-State-Zip: MOUNTAIN VIEW CA 94043

Title DIRECTOR
Name AEGERTER, ILARI HENRIK
Address REGENSBURGSTRASSE 198
City-State-Zip: ZURICH 8050

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: ERIC PROEGLER

TREASURER

03/07/2016

Electronic Signature of Signing Officer/Director Detail_____
Date