## 2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08000005306

Entity Name: HIGH PRESSURE SCIENCE SOCIETY OF AMERICA

CORPORATION

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

CESMEC, VH-140, FLORIDA INTERNATIONAL UNIV UNIVERSITY PARK, SW11200 AVE MIAMI, FL 33199

## **Current Mailing Address:**

CESMEC, VH-140, FLORIDA INTERNATIONAL UNIV UNIVERSITY PARK, SW11200 AVE MIAMI, FL 33199

FEI Number: 36-4635785 Certificate of Status Desired: No

## Name and Address of Current Registered Agent:

SAXENA, MAYA SAXENA-WHITE PA 5200 TOWN CENTER CIRCLE 601 BOCA RATON, FL 33486 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:

Date Electronic Signature of Registered Agent

Officer/Director Detail:

Title Title

Name SAXENA, S.K. DR. Name CHEN, J DR.

Address CESMEC, FIU, UNIVERSITY PARK Address CESMEC, FIU, UNIVERSITY PARK

City-State-Zip: MIAMI FL 33199 City-State-Zip: MIAMI FL 33199

Title D Title Т

DURYGIN, A DR. Name MAO, HK DR. Name

Address GEOPHYSICAL LABORATORY, CIW Address CESMEC, FIU, UNIVERSITY PARK

City-State-Zip: WACHINGTON DC City-State-Zip: MIAMI FL 33199

Title D Title D

SHEN, G DR. Name Name HEMLEY, R DR.

HPCAT, ADVANCED PHOTON Address GEOPHYSICAL LOBORATORY, CIW Address

SOURCE, ARGONNE

City-State-Zip: WASHINGTON DC City-State-Zip: ARGONNE IL

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: SAXENA, S. K. DR.

PRESIDENT

02/15/2017

**FILED** Feb 15, 2017

Secretary of State

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