

**2018 FLORIDA NOT FOR PROFIT CORPORATION AMENDED ANNUAL  
REPORT**

DOCUMENT# N11000002327

**Entity Name:** CENTER FOR THE ADVANCEMENT OF SCIENCE IN SPACE,  
INC.

**Current Principal Place of Business:**

6905 NORTH WICKHAM ROAD  
SUITE 500  
MELBOURNE, FL 32940

**Current Mailing Address:**

6905 NORTH WICKHAM ROAD  
SUITE 500  
MELBOURNE, FL 32940 US

**FEI Number:** 27-5410763

**Certificate of Status Desired:** Yes

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

CORPORATION SERVICE COMPANY  
1201 HAYS STREET  
TALLAHASSEE, FL 32301-2525 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	SECRETARY
Name	KUEHNER, MELODY
Address	6905 NORTH WICKHAM ROAD SUITE 500
City-State-Zip:	MELBOURNE FL 32940
Title	CHAIRMAN
Name	ABRAHAMSON, LTGEN. JAMES A. USAF
Address	6905 NORTH WICKHAM ROAD SUITE 500
City-State-Zip:	MELBOURNE FL 32940
Title	DIRECTOR
Name	RUCKENSTEIN, ANDREI
Address	6905 NORTH WICKHAM ROAD SUITE 500
City-State-Zip:	MELBOURNE FL 32940
Title	DIRECTOR
Name	ZUCKER, HOWARD
Address	6905 NORTH WICKHAM ROAD SUITE 500
City-State-Zip:	MELBOURNE FL 32940

Title	TREASURER
Name	FERNANDEZ, JORGE
Address	6905 NORTH WICKHAM ROAD SUITE 500
City-State-Zip:	MELBOURNE FL 32940
Title	DIRECTOR
Name	DUNCAN, LEWIS
Address	6905 NORTH WICKHAM ROAD SUITE 500
City-State-Zip:	MELBOURNE FL 32940
Title	DIRECTOR
Name	VUNJAK-NOVAKOIC, GORDANA
Address	6905 NORTH WICKHAM ROAD SUITE 500
City-State-Zip:	MELBOURNE FL 32940
Title	VC
Name	FORMICHELLI, JOSEPH
Address	6905 NORTH WICKHAM ROAD SUITE 500
City-State-Zip:	MELBOURNE FL 32940

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*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:** JORGE FERNANDEZ

**TREASURER**

**09/05/2018**

Electronic Signature of Signing Officer/Director Detail

Date

**Officer/Director Detail Continued :**

Title DIRECTOR  
Name MIAOULIS, IOANNIS  
Address 6905 NORTH WICKHAM ROAD  
SUITE 500  
City-State-Zip: MELBOURNE FL 32940

Title DIRECTOR  
Name TICKNOR, CAROLYN  
Address 6905 NORTH WICKHAM ROAD  
SUITE 500  
City-State-Zip: MELBOURNE FL 32940

Title PRESIDENT  
Name VOCKLEY, JOSEPH  
Address 6905 NORTH WICKHAM ROAD  
SUITE 500  
City-State-Zip: MELBOURNE FL 32940

Title DIRECTOR  
Name SCHEIN, PHILIP  
Address 6905 NORTH WICKHAM ROAD  
SUITE 500  
City-State-Zip: MELBOURNE FL 32940

Title DIRECTOR  
Name SMITH, STEVEN  
Address 6905 NORTH WICKHAM ROAD  
SUITE 500  
City-State-Zip: MELBOURNE FL 32940