

**2013 FOREIGN NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 837474

**Entity Name:** AUTISM SOCIETY OF AMERICA, INC.

**Current Principal Place of Business:**

4340 EAST-WEST HIGHWAY  
SUITE 350  
BETHESDA, MD 20814

**Current Mailing Address:**

4340 EAST-WEST HIGHWAY  
SUITE 350  
BETHESDA, MD 20814

**FEI Number:** 52-1020149

**Certificate of Status Desired:** No

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

CORPORATION SERVICE COMPANY  
1201 HAYS STREET  
TALLAHASSEE, FL 32301 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 DIR  
Name BASINGER, JONATHAN  
Address 4340 EAST-WEST HIGHWAY, SUITE  
350  
City-State-Zip: BETHESDA MD 20814

Title PRES  
Name BADESCH, SCOTT  
Address 4340 EAST-WEST HIGHWAY, SUITE  
350  
City-State-Zip: BETHESDA MD 20814

Title DIR  
Name BALL, JAMES  
Address 4340 EAST-WEST HIGHWAY, SUITE  
350  
City-State-Zip: BETHESDA MD 20814

Title TREA  
Name MARIACA, SERGIO  
Address 4340 EAST-WEST HIGHWAY, SUITE  
350  
City-State-Zip: BETHESDA MD 20814

Title SEC  
Name PERNER, LARS  
Address 4340 EAST-WEST HIGHWAY, SUITE  
350  
City-State-Zip: BETHESDA MD 20814

*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:** LARS PERNER

**SECRETARY**

**03/28/2013**

Electronic Signature of Signing Officer/Director Detail

Date