

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 755043

FILED  
Apr 02, 2008  
Secretary of State

Entity Name: AUTISTIC SERVICES, INC.

**Current Principal Place of Business:**

901 NW 4TH AVE.  
BOCA RATON, FL 33432

**New Principal Place of Business:**

**Current Mailing Address:**

901 NW 4TH AVE.  
BOCA RATON, FL 33432

**New Mailing Address:**

FEI Number: 59-2099391      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

KALMAN, JANET  
901 NW 4TH AVE.  
BOCA RATON, FL 33432      US

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

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

**OFFICERS AND DIRECTORS:**

Title: CP      ( ) Delete  
Name: KINGSLEY-SCOTT, SHAWNA  
Address: 1935 NW 9TH ST  
City-St-Zip: DELRAY BEACH, FL 33445

Title: CP      ( ) Delete  
Name: KALMAN, JANET  
Address: 901 NW 4TH AVE.  
City-St-Zip: BOCA RATON, FL 33432

Title: D      ( ) Delete  
Name: STINE, CLAUDIA  
Address: 2814 S.W. 4TH STREET  
City-St-Zip: BOYNTON BEACH, FL 33435

Title: D      ( ) Delete  
Name: CARROLL, BETSY P  
Address: 15240 MEADOW WOOD DRIVE  
City-St-Zip: WELLINGTON, FL 33414

Title: D      ( ) Delete  
Name: BALLANCE, PETER W  
Address: 4206 CAESAR CIRCLE  
City-St-Zip: LAKE WORTH, FL 33463

Title: D      ( ) Delete  
Name: SANTORO, STEPHANIE  
Address: 9935 GALLEON DRIVE  
City-St-Zip: WEST PALM BEACH, FL 33411

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: T      (X) Change ( ) Addition  
Name: BERMAN, STACEY  
Address: 13432 157TH COURT N  
City-St-Zip: JUPITER, FL 33478

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: STACEY BERMAN

T

04/02/2008

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date