

2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F02000004007

FILED
Mar 16, 2012
Secretary of State

Entity Name: GLSEN, INC.

Current Principal Place of Business:

90 BROAD STREET
2ND FLOOR
NEW YORK, NY 10004

New Principal Place of Business:

Current Mailing Address:

90 BROAD STREET
2ND FLOOR
NEW YORK, NY 10004

New Mailing Address:

FEI Number: 04-3234202 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

NRAI SERVICES, INC.
515 E. PARK AVENUE
TALLAHASSEE, FL 32301 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: P
Name: BYARD, ELIZA
Address: 90 BROAD STREET, 2ND FLOOR
City-St-Zip: NEW YORK, NY 10004

Title: C-CH
Name: PEDLOW, RYAN
Address: 166 PERRY STREET
City-St-Zip: NEW YORK, NY 10014 US

Title: D
Name: BROWN, KAREN
Address: 2019 LINMAR DRIVE, NE
City-St-Zip: CEDAR RAPIDS, IA 52402

Title: C-CH
Name: LOPES, GAIL
Address: 79-370 CENTRINO
City-St-Zip: LA QUINTA, CA 92253

Title: AT
Name: FLORES, DOUG
Address: 90 BROAD STREET, 2ND FLOOR
City-St-Zip: NEW YORK, NY 10004

Title: D
Name: BROCKMAN, KEVIN
Address: 232 NORTH ARDEN BLVD.
City-St-Zip: LOS ANGELES, CA 90004

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: DOUG FLORES

AT

03/16/2012

Electronic Signature of Signing Officer or Director

Date