2012 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 12, 2012
Secretary of State

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Entity Name: AUTISM KEY, LLC

Current Principal Place of Business:

7050 WEST PALMETTO PARK ROAD
SUITE 15-549
BOCA RATON, FL 33433

New Principal Place of Business:

Current Mailing Address:

7050 WEST PALMETTO PARK ROAD
SUITE 15-549
BOCA RATON, FL 33433

New Mailing Address:

FEI Number: 90-0707254 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

GREAVES, GARY
7050 WEST PALMETTO PARK ROAD
SUITE 15-549
BOCA RATON, FL 33433 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

MANAGING MEMBERS/MANAGERS:

Title: MGRM
Name: GREAVES, GARY
Address: 7050 WEST PALMETTO PARK RD, SUITE 15-549
City-St-Zip: BOCA RATON, FL 33433

Title: MGRM
Name: CASTERLINE, ROBERT
Address: 7050 WEST PALMETTO PARK RD, SUITE 15-549
City-St-Zip: BOCA RATON, FL 33433

I hereby certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statues.

SIGNATURE: GARY GREAVES MGRM 04/12/2012

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date