

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000000602

FILED
May 04, 2007
Secretary of State

Entity Name: ALLIANCE FOR SCIENCE, HEALTH AND ENVIRONMENT, INC.

Current Principal Place of Business:

514 OCEAN AVE
SUITE 6
MELBOURNE BEACH, FL 32951

New Principal Place of Business:

Current Mailing Address:

514 OCEAN AVE
SUITE 6
MELBOURNE BEACH, FL 32951

New Mailing Address:

PO BOX 510406
MELBOURNE BEACH, FL 32951

FEI Number: 47-0898951 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

HERBER, SCOTT A
211 FLAMINGO LANE
MELBOURNE BEACH, FL 32951 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: PD () Delete
Name: FODOR, LYNETTE T
Address: 211 FLAMINGO LANE
City-St-Zip: MELBOURNE BEACH, FL 32951

Title: DV () Delete
Name: PETRIE, CHRIS
Address: 2380 ST. ANDREWS DR
City-St-Zip: TITUSVILLE, FL 32780

Title: TD () Delete
Name: HERBER, SCOTT A
Address: 211 FLAMINGO LANE
City-St-Zip: MELBOURNE BEACH, FL 32951

Title: BM () Delete
Name: REDDY, STEPHEN Z
Address: 14395 80TH AVE
City-St-Zip: SEBASTIAN, FL 32957

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:

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: SCOTT A HERBER

T

05/04/2007

Electronic Signature of Signing Officer or Director

_____ Date