2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000007998

Entity Name: CITIZENS FOR SCIENCE AND ETHICS, INC.

Apr 25, 2007 Secretary of State

| Current Principal Plac | e of Business: | New Princi | pal Place of Business |
|------------------------|----------------|-------------------|-----------------------|
| | | | |

95 S FEDERAL HWY SUITE 200 1499 W. PALMETTO PARK ROAD BOCA RATON, FL 33432

SUITE 405

BOCA RATON, FL 33486

Current Mailing Address: New Mailing Address:

95 S FEDERAL HWY SUITE 200 1499 W. PALMETTO PARK ROAD BOCA RATON, FL 33432

SUITE 405

BOCA RATON, FL 33486

FEI Number: 20-3391680 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

COURTNEY, THOMAS H 110 MERRICK WAY SUITE 3-B CORAL GABLES, FL 33134

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:

Date

Electronic Signature of Registered Agent

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

OFFICERS AND DIRECTORS:

() Delete

(X) Change () Addition

CUTAIA, SUSAN CUTAIA, SUSAN Name: Name:

95 S FEDERAL HWY SUITE 200 Address: 1499 W. PALMETTO PARK ROAD - SUITE 405 Address:

City-St-Zip: BOCA RATON, FL 33432 City-St-Zip: BOCA RATON, FL 33486

Title: Title: () Delete () Change () Addition

Name: THUNING-ROBERSON, CLAIRE Name: Address: 521 W TROPICAL WAY Address: City-St-Zip: PLANTATION, FL 33317 City-St-Zip:

Title: DVT () Delete Title: DVT (X) Change () Addition

LAYWELL, ERIC Name: ARIAS, MICHAEL Name: 12641 SW 78TH STREET Address: 2127 SW 95TH TERR Address: City-St-Zip: GAINESVILLE, FL 32607 City-St-Zip: MIAMI, FL 33183

Title: () Delete Title: () Change () Addition

Name: TRUEBA, CARLOS, CPA M Name: 1985 NW 88TH CT., #101 Address: Address: City-St-Zip: MIAMI, FL 33172 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: SUSAN D. CUTAIA **PRES** 04/25/2007