2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 25, 2009
Secretary of State

DOCUMENT# N05000007998

Entity Name: CITIZENS FOR SCIENCE AND ETHICS, INC.

Current Principal Place of Business:

526 EAST PARK AVENUE
1ST FLOOR
TALLAHASSEE, FL 32301

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 1491
TALLAHASSEE, FL 32302

New Mailing Address:

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

Name and Address of Current Registered Agent:

COURTNEY, THOMAS H
110 MERRICK WAY SUITE 3-B
CORAL GABLES, FL 33134 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:	DP	( ) Delete
Name:	THUNING-ROBERSON, CLAIRE DR.	
Address:	521 W. TROPICAL WAY	
City-St-Zip:	PLANTATION, FL 33317	
Title:	T	( ) Delete
Name:	MICHAEL, FINNEGAN	
Address:	821 N. FIG TREE LANE	
City-St-Zip:	PLANTATION, FL 33317	
Title:	DV	( ) Delete
Name:	ARIAS, MICHAEL	
Address:	12641 SW 78TH STREET	
City-St-Zip:	MIAMI, FL 33183	
Title:	D	( ) Delete
Name:	TRUEBA, CARLOS, CPA M	
Address:	1985 NW 88TH CT., #101	
City-St-Zip:	MIAMI, FL 33172	
Title:	D	( ) Delete
Name:	FINNEGAN, STEPHANIE C	
Address:	821 N. FIG TREE LANE	
City-St-Zip:	PLANTATION, FL 33317	
Title:	D	( ) Delete
Name:	BALDUCI, LODOVICO DR	
Address:	4128 CARROLLWOOD VILLAGE DR.	
City-St-Zip:	TAMPA, FL 33624	

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:	( ) 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: CLAIRE THUNING-ROBERSON DP 03/25/2009

Electronic Signature of Signing Officer or Director — Date