2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 21, 2009
Secretary of State

DOCUMENT# N08000011410

Entity Name: FOR A NEW SOCIAL SCIENCE, INC.

Current Principal Place of Business:

C/O WILLIAM B. ANDERSON
3871 VIA POINCIANA, NO. 102
LAKE WORTH, FL 33467 US

New Principal Place of Business:

Current Mailing Address:

C/O WILLIAM B. ANDERSON
3871 VIA POINCIANA, NO. 102
LAKE WORTH, FL 33467 US

New Mailing Address:

FEI Number: 94-3089768 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

CORLEY, WILLIAM E III
4004 SAN CLERC RD
JACKSONVILLE, FL 32217 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: D, P ( ) Delete
Name: LEVEN, SAMUEL J
Address: C/O WILLIAM B. ANDERSON
City-St-Zip: 3871 VIA POINCIANA, NO. 102, FL 33467

Title: D VP ( ) Delete
Name: CORLEY, WILLIAM E III
Address: 4004 SAN CLERC RD
City-St-Zip: JACKSONVILLE, FL 32217

Title: D ( ) Delete
Name: ANDERSON, WILLIAM B
Address: 3871 VIA POINCIANA, NO. 102
City-St-Zip: LAKE WORTH, FL 33467

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:

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: SAMUEL J LEVEN D, P 04/21/2009
Electronic Signature of Signing Officer or Director Date