

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N09000010511

FILED
Jun 23, 2011
Secretary of State

Entity Name: NONPROFIT SCIENCE INC.

Current Principal Place of Business:

1009 BROOKWOOD ROAD
JACKSONVILLE, FL 32207 US

New Principal Place of Business:

Current Mailing Address:

1009 BROOKWOOD ROAD
JACKSONVILLE, FL 32207 US

New Mailing Address:

FEI Number: 27-1664038

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BAILEY, CHRISTEE E
1009 BROOKWOOD ROAD
JACKSONVILLE, FL 32207 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: P
Name: BAILEY, CHRISTEE E
Address: 1009 BROOKWOOD ROAD
City-St-Zip: JACKSONVILLE, FL 32207 US

Title: VP
Name: WILKES, AMY
Address: 4362 KELNEPA DRIVE
City-St-Zip: JACKSONVILLE, FL 32207

Title: LS
Name: TURKNET, ALIISON
Address: 1009 BROOKWOOD ROAD
City-St-Zip: JACKSONVILLE, FL 32207 US

Title: FA
Name: BROCKDORF, SOREN
Address: 1009 BROOKWOOD ROAD
City-St-Zip: JACKSONVILLE, FL 32207 US

I hereby 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 all other like empowered.

SIGNATURE: CHRISTEE E. BAILEY

P

06/23/2011

Electronic Signature of Signing Officer or Director

Date