

2012 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT**FILED**
May 02, 2012
Secretary of State

DOCUMENT# N10000010629

Entity Name: MISSION AUTISM SUPPORT, INC.**Current Principal Place of Business:**6988 HAYTER DRIVE
LAKELAND, FL 33813**New Principal Place of Business:****Current Mailing Address:**6988 HAYTER DRIVE
LAKELAND, FL 33813**New Mailing Address:****FEI Number:** 45-5190552**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**TAYLOR, NICHOLAS
6988 HAYTER DRIVE
LAKELAND, FL 33813 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: TAYLOR, NICHOLAS
Address: 6988 HAYTER DRIVE
City-St-Zip: LAKELAND, FL 33813**Title:** DIR
Name: TAYLOR, LIV H
Address: 6988 HAYTER DRIVE
City-St-Zip: LAKELAND, FL 33813

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: LIV H TAYLOR

DIR

05/02/2012

Electronic Signature of Signing Officer or Director

Date