

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N28026

FILED
Apr 28, 2008
Secretary of State

Entity Name: AUTISM SOCIETY OF FLORIDA, INC.

Current Principal Place of Business:

19732 NE 12TH PLACE
MIAMI, FL 33179 US

New Principal Place of Business:

8001 DUNCASTLE COURT
MELBOURNE, FL 32940 US

Current Mailing Address:

PO BOX 970646
COCONUT CREEK, FL 33097 US

New Mailing Address:

FEI Number: 59-2910367 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

GUARINO, MICHAEL
7268 CRYSTAL SPRING RUN
WEEKI WACHEE, FL 34607 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: PD () Delete
Name: SEQUENZIA, VEN
Address: 19732 NE 12TH PLACE
City-St-Zip: MIAMI, FL 33179

Title: VD () Delete
Name: OCAMPO, ASHLEY
Address: 1900 CENTER POINTE BLVD., APT. 143
City-St-Zip: TALLAHASSEE, FL 32308

Title: TD () Delete
Name: WARDY, DONALD
Address: 7545 S. TROPICAL TRAIL
City-St-Zip: MERRITT ISLAND, FL 32952

Title: SD () Delete
Name: GALLOWAY, CARL
Address: 1410 MAYFIELD AVENUE
City-St-Zip: WINTER PARK, FL 32789

Title: VD () Delete
Name: DEMARIA, ROBERT
Address: 10720 SW 146 PLACE
City-St-Zip: MIAMI, FL 33186

Title: D () Delete
Name: BECERRA, TERESA
Address: 13254 SW 146 STREET
City-St-Zip: MIAMI, FL 33186

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: SEQUENZIA, VEN
Address: 8001 DUNCASTLE COURT
City-St-Zip: MELBOURNE, FL 32940

Title: VD (X) Change () Addition
Name: OCAMPO, ASHLEY
Address: 1002 MICCOSUKEE RD
City-St-Zip: TALLAHASSEE, FL 32308

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: SD (X) Change () Addition
Name: GALLOWAY, CARL
Address: 1950 KING AUTHUR CIRCLE
City-St-Zip: MAITLAND, FL 32751

Title: VD (X) Change () Addition
Name: DEMARIA, ROBERT
Address: 14218 SW 136 STREET
City-St-Zip: MIAMI, FL 33186

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: VEN SEQUENZIA

PD

04/28/2008

Electronic Signature of Signing Officer or Director

Date