2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N93000005777

Entity Name: FLORIDA DEAF GOLF ASSOCIATION, INC.

FILED
May 29, 2016
Secretary of State
CC4151006614

Date

Current Principal Place of Business:

636 EVELYNTON LOOP THE VILLAGES. FL 32162

Current Mailing Address:

636 EVELYNTON LOOP THE VILLAGES, FL 32162 US

FEI Number: 65-0450621 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

WILSON, JOHN A 636 EVELYNTON LOOP THE VILLAGES, FL 32162 US

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: JOHN A WILSON 05/29/2016

Electronic Signature of Registered Agent Date

Officer/Director Detail:

Title PRES Title VP

Name SCHULER, RICHARD Name JOHNSTON, BRIAN

Address 16661 JOHNSON LANE Address 2214 NORTH 34TH AVENUE

City-State-Zip: NORTH FORT MYERS FL 33916 City-State-Zip: HOLLYWOOD FL 33021

Title SECY Title OTHER

Name SCHWARZ, LOUIS Name DEUEL, HAROLD

Address 2172 BLACKVILLE DRIVE Address 120 LEGENDARY DRIVE

City-State-Zip: THE VILLAGES FL 32162 City-State-Zip: ST. AUGUSTINE FL 32092

Title TREASURER Title OTHER

Name HAMSTRA, CHRIS Name DEMOTTE, ROY

Address 1020 SE 27TH STREET Address 5493 WARD LAKE DRIVE
City-State-Zip: CAPE CORAL FL 33904 City State Zip: DORT ORANGE FL 20128

ty-State-Zip: CAPE CORAL FL 33904 City-State-Zip: PORT ORANGE FL 32128

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: CHRIS HAMSTRA TREASURER 05/29/2016