

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 702075

FILED  
Mar 03, 2012  
Secretary of State

**Entity Name:** ST. PETERSBURG ASSOCIATION OF THE DEAF, INC.

**Current Principal Place of Business:**

4825 EAST BAY DRIVE  
CLEARWATER, FL 33764

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 8543  
CLEARWATER, FL 33758

**New Mailing Address:**

**FEI Number:** 59-2498393

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

**Name and Address of Current Registered Agent:**

KNETZER, MARILYN  
601 PALM PL  
SAFETY HARBOR, FL 34695 US

**Name and Address of New Registered Agent:**

TREASURER  
4825 EAST BAY DRIVE  
CLEARWATER, FL 33764 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: DAVID JUSTIN WELKER JUNIOR

03/03/2012

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: P  
Name: KNETZER, MARILYN D  
Address: 601 PALM PLACE  
City-St-Zip: SAFETY HARBOR, FL 34695

Title: VP  
Name: MIKOS, ROSEMARY  
Address: 1014 SW 22ND TERRACE  
City-St-Zip: CAPE CORAL, FL 33991

Title: SD  
Name: RODRIQUEZ, GELAND  
Address: 1647 PINEWOOD DRIVE  
City-St-Zip: CLEARWATER, FL 33756

Title: TD  
Name: WELKER, DAVID J JR  
Address: 12903 CAMBRIDGE AVEUNE  
City-St-Zip: TAMPA, FL 33624

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: DAVID JUSTIN WELKER JUNIOR

TD

03/03/2012

Electronic Signature of Signing Officer or Director

Date