

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 704844

FILED
Feb 11, 2008
Secretary of State

Entity Name: FLORIDA ASSOCIATION OF THE DEAF

Current Principal Place of Business:

5107 14TH ST W
BRADENTON, FL 342072431

New Principal Place of Business:

11145 SANDYSHELL WAY
BOCA RATON, FL 33498

Current Mailing Address:

5107 14TH ST W
BRADENTON, FL 342072431

New Mailing Address:

PO BOX 971134
BOCA RATON, FL 334971134

FEI Number: 59-6153406

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DUNN, SHERI
5107 14TH ST W
BRADENTON, FL 342072431 US

Name and Address of New Registered Agent:

DUNN, SHERI
11145 SANDYSHELL WAY
BOCA RATON, FL 33498 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: SHERI L. DUNN

02/11/2008

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: WAGNER, CHRISTOPHER D
Address: 5107 14TH ST W
City-St-Zip: BRADENTON, FL 342072431

Title: VP () Delete
Name: PETERSON, JIMMY
Address: 5107 14TH STREET W
City-St-Zip: BRADENTON, FL 342072431

Title: S () Delete
Name: MOLINA, LISSETTE M
Address: 5107 14TH STREET W
City-St-Zip: BRADENTON, FL 342072431

Title: T () Delete
Name: DUNN, SHERI
Address: 5107 14TH STREET W
City-St-Zip: BRADENTON, FL 342072431

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: LANGE, ANDY J
Address: 9 FLAMINGO DRIVE
City-St-Zip: ST. AUGUSTINE, FL 32080

Title: VP (X) Change () Addition
Name: WATSON, MELISSA
Address: 2787 SOUTHLAND RD
City-St-Zip: MOUNT DORA, FL 32757

Title: S (X) Change () Addition
Name: VEGA, REY
Address: 3569 FOREST HILL BLVD UNIT #97
City-St-Zip: WEST PALM BEACH, FL 33406

Title: T (X) Change () Addition
Name: DUNN, SHERI
Address: 11145 SANDYSHELL WAY
City-St-Zip: BOCA RATON, FL 33498

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: SHERI L. DUNN

T

02/11/2008

Electronic Signature of Signing Officer or Director

Date