

# 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Apr 10, 2006 8:00 am**  
**Secretary of State**

04-10-2006 90325 040 \*\*\*\*70.00

<b>DOCUMENT # 741683</b> 1. Entity Name <b>BAY AREA DEAF SENIOR CITIZENS OF FLORIDA, INC.</b>					
Principal Place of Business <b>2612 PEARCE DR #306 CLEARWATER, FL 33764</b>			Mailing Address <b>2612 PEARCE DR #306 CLEARWATER, FL 33764</b>		
2. Principal Place of Business <b>3151 LANDMARK DR.</b>		3. Mailing Address <b>3151 LANDMARK DR.</b>		  01032006    Chg-NP    CR2E037 (11/05)	
Suite, Apt. #, etc. <b>SUITE 111</b>		Suite, Apt. #, etc. <b>SUITE 111</b>			
City & State <b>CLEARWATER FL</b>		City & State <b>CLEARWATER FL</b>			
Zip <b>33761</b>		Zip <b>33761</b>			
Country <b>PINELAS</b>		Country <b>PINELAS</b>		4. FEI Number <b>59-1660842</b>	
5. Certificate of Status Desired <input checked="" type="checkbox"/> \$8.75 Additional Fee Required				<input checked="" type="checkbox"/> Applied For <input type="checkbox"/> Not Applicable	
6. Name and Address of Current Registered Agent  <b>BLAYLOCK, JOHN W. 2612 PEARCE DR #306 CLEARWATER, FL 33764</b>			7. Name and Address of New Registered Agent Name <b>JEROME W. PEEPLES</b> Street Address (P.O. Box Number is Not Acceptable) <b>3151 LANDMARK DR.</b> <b>SUITE 111</b> City <b>CLEARWATER</b> FL    Zip Code <b>33761</b>		
8. 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. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE: <u>JEROME W. PEEPLES</u> <i>[Signature]</i> DATE: <u>4.6.06</u> <small>(Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating.)</small>					
Filing Fee is \$61.25 Due by May 1, 2006		9. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees		Make check payable to Florida Department of State	
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P SPENCER, RONALD C. 803 E. BROAD ST. TAMPA, FL 33604	<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	P JOHN W. BLAYLOCK 2612 PEARCE DR. #306 CLEARWATER, FL 33764	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V PARKER, ROY 1275 BELCHER RD #88 DUNEDIN, FL 34698	<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	V SARAH HARRIS 7924 41ST ST. N. PINELAS PARK, FL 33781	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S WHITMORE, JUDITH 13622 61ST WAY N CLEARWATER, FL 33760	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	S SAME	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T BLAYLOCK, JOHN W. 2612 PEARCE DR #306 CLEARWATER, FL 33764	<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	JEROME W. PEEPLES 3151 LANDMARK DR. SUITE 111 CLEARWATER, FL 33761	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D DICKERSON, MAGGIE 8632 BOBLLINA RD PORT RICHEY, FL 34668	<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	MEMBER AT LARGE KATHY VAN KUREN 7450 35TH N. #1401 PINELAS PARK, FL 33781	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D WILLIAM NEAL 2232 GLENMOOR RD N CLEARWATER, FL	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	SAME	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.					
SIGNATURE: <u>JEROME W. PEEPLES</u> <i>[Signature]</i> DATE: <u>4.6.06</u> DAYTIME PHONE #: <u>727-786-2013</u> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>					

TPY