

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jul 17, 2008 8:00 am
Secretary of State

03-12-2008 90024 038 ****70.00

DOCUMENT # 741683 1. Entity Name BAY AREA DEAF SENIOR CITIZENS OF FLORIDA, INC.					
Principal Place of Business 3151 LANDMARK DR SUITE 111 CLEARWATER, FL 33761			Mailing Address 3151 LANDMARK DR SUITE 111 CLEARWATER, FL 33761		
2. Principal Place of Business - No P.O. Box # 2612 PEARCE DR Suite, Apt. #, etc. #306		3. Mailing Address P.O. Box 8543 Suite, Apt. #, etc.		66015371 	
City & State CLEARWATER, FL		City & State CLEARWATER, FL		4. FEI Number 59-1660842	
Zip 33764		Country		5. Certificate of Status Desired ☒ \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent PEEPLES, JEROME W 3151 LANDMARK DR SUITE 111 CLEARWATER, FL 33761		7. Name and Address of New Registered Agent Name JOHN W. BLAYLOCK Street Address (P.O. Box Number is Not Acceptable) 2612 PEARCE DR #306 City CLEARWATER FL Zip Code 33764			
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>RONALD C. SPENCER SR</u> <u>Ronald Spencer Sr</u> 7-15-08 Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE					
Filing Fee is \$81.25 Due by September 12, 2008		9. Election Campaign Financing Trust Fund Contribution. ☐		\$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 P NAME BLAYLOCK, JOHN W STREET ADDRESS 2612 PEARCE DR., #306 CITY-ST-ZIP CLEARWATER, FL 33764	☒ Delete		TITLE P NAME RONALD C. SPENCER SR. STREET ADDRESS 803 E. BROAD ST. CITY-ST-ZIP TAMPA FL 33604	☐ Change ☐ Addition	
TITLE V NAME HARRIS, SARAH STREET ADDRESS 7924 47 ST N CITY-ST-ZIP PINELLAS PARK, FL 33781	☒ Delete		TITLE V NAME JANET DIVINCENZO STREET ADDRESS 7100 WILMERTON RD #2041 CITY-ST-ZIP LARGO, FL 33771	☐ Change ☐ Addition	
TITLE S NAME WHITMORE, JUDITH STREET ADDRESS 13622 61ST WAY N CITY-ST-ZIP CLEARWATER, FL 33760	☐ Delete		TITLE S NAME JUDITH A. WHITMORE STREET ADDRESS 13622 61ST WAY N CITY-ST-ZIP CLEARWATER, FL 33760	☐ Change ☐ Addition	
TITLE T NAME PEEPLES, JEROME W STREET ADDRESS 3151 LANDMARK DR., SUITE 111 CITY-ST-ZIP CLEARWATER, FL 33761	☒ Delete		TITLE T NAME JOHN W. BLAYLOCK STREET ADDRESS 2612 PEARCE DR. #306 CITY-ST-ZIP CLEARWATER, FL 33764	☐ Change ☐ Addition	
TITLE MAL NAME VAN KUREN, KATHY STREET ADDRESS 7450 35TH N #1401 CITY-ST-ZIP PINELLAS PARK, FL 33781	☒ Delete		TITLE CT NAME ROY PARKER STREET ADDRESS 1245 BELCHER RD #88 CITY-ST-ZIP DUNEDIN, FL 34698	☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ 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>RONALD C. SPENCER SR</u> <u>Ronald Spencer Sr</u> 7-15-08 813-272-7201 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #					