

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 741683

FILED
Feb 07, 2009
Secretary of State

Entity Name: BAY AREA DEAF SENIOR CITIZENS OF FLORIDA, INC.

Current Principal Place of Business:

2612 PEARCE DR
#306
CLEARWATER, FL 33764

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 8543
CLEARWATER, FL 337178543

New Mailing Address:

FEI Number: 59-1660842

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

BLAYLOCK, JOHN W
2612 PEARCE DR #306
CLEARWATER, FL 33764 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: SPENCER SR, RONALD C
Address: 803 E. BROAD ST.
City-St-Zip: TAMPA, FL 33604

Title: V () Delete
Name: DIVINCENZO, JANET
Address: 7100 ULMERTON RD #2041
City-St-Zip: LARGO, FL 33771

Title: S () Delete
Name: WHITMORE, JUDITH
Address: 13622 61ST WAY N
City-St-Zip: CLEARWATER, FL 33760

Title: T () Delete
Name: BLAYLOCK, JOHN W
Address: 2612 PEARCE DR. #306
City-St-Zip: CLEARWATER, FL 33764

Title: CT () Delete
Name: PARKER, ROY
Address: 1275 BELCHER RD #88
City-St-Zip: DUNEDIN, FL 34698

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: JOHN BLAYLOCK

TD

02/07/2009

Electronic Signature of Signing Officer or Director

Date