## 2000 UNIFORM BUSINESS REPORT (UBR)

## FILED **DOCUMENT # 762534** Jan 28, 2000 8:00 am Secretary of State 1. Entity Name DEAF AND HARD OF HEARING SERVICES OF VOLUSIA AND 01-28-2000 90102 022 \*\*\*\*61.25 Principal Place of Business Mailing Address 116 S PALMETTO 116 S PALMETTO STE Q DAYTONA BEACH FL 32114-4320 DAYTON BEACH FL 32114 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Applied For City & State City & State 4. FEI Number 59-2185572 Not Applicable Zip Country Country \$8,75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) SINNOTT, LYNN 116 S. PALMETTO ST. DAYTONA BEACH FL 32114 Zip Code City 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 SIGNATURE (NOTE: Registered Agent signature required when reinstating) DATE Make Check Payable to - 9. Election Campaign Financing FILE NOW: \$5.00 May Be Trust Fund Contribution. Added to Fees Department of State **FEE IS \$61.25** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 OFFICERS AND DIRECTORS 10. 11. Addition TITLE: 🛬 TITLE Henry Slater CARROLL, CHARLES NAME NAME 1205 Sunset Circle 1200 W INTERNATIONAL SPDWY BLVD STREET ADDRESS STREET ADDRESS Daytona Beach F1 32114 DAYTONA BEACH FL 31114 CITY-ST-ZIP CITY-ST-ZIF Change Addition Delete TITI F Mary Mathwich 1133 Oceanshore Blvd. # 1002 BARBER, AMY NAME NAME 1112 LIVE OAK ST STREET ADDRESS STREET ADDRESS CITY-ST-ZIP **NEW SMYRNA BEACH FL 32168** CITY-ST-ZIP Ormand Beach F1 32176 OS Change Addition TITLE ☐ Delete TITLE MOORE, KENDALL Cynthia Senis NAME NAME 103 BARRIER ISLE DR STREET ADDRESS 5738 John Anderson Orive STREET ADDRESS ORMAOND BEACH FL 32176 CITY-ST-ZIE CITY-ST-ZIE Flagler Beach F1 32136 Change Addition Delete TITLE TITLE Jan Burnsides MCLEOD, MARTHA NAME. NAME 201 Cessna Blvd 116 S. PALMETTO STREET ADDRESS STREET ADDRESS DAYTONA BEACH FL CITY-ST-ZIP Daytona Beach FL CITY-ST-ZIP ☐ Change ☐ Addition □ Delete TITLE TITLE matzat, fleix NAME NAME 197 E LANSDOWN AVE STREET ADDRESS STREET ADDRESS ORANGE CITY FL 32763 CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition TITLE Delete-TITLE KAMER, DAVID NAME NAME 150 MAGNOLIA AVE STREET ADDRESS STREET ADDRESS DAYTONA BEACH FL 32114 CITY-ST-ZIP CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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:

SIGNATURE AND OPEN ON PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/21/3000 Date

Daytime Phone #