

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 769268

1. Entity Name

FRIENDS OF THE DEAF SERVICE CENTER, INC.

Principal Place of Business

7190 76TH STREET N.
PINELLAS PARK FL 33780
US

Mailing Address

P.O. BOX 2730
PINELLAS PARK FL 33780-2730

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

59-2396122

Applied For

Not Applicable

5. Certificate of Status Desired



\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

CONNER, JERRY L
7190 76TH ST. N.
PINELLAS PARK FL 33781

Name

Conner, Jerry L.

Street Address (P.O. Box Number is Not Acceptable)

7545 83rd St N

City

Seminole

FL

Zip Code

33777

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

Jerry L. Conner

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

04/14/00

DATE

FILE NOW:
FEE IS \$61.25

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make Check Payable to
Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE PD ☒ Delete
NAME BLAYLOCK, JOHN JR.
STREET ADDRESS 2623 SEVILLE BLVD. #101
CITY-ST-ZIP CLEARWATER FL 33764

TITLE VPD ☐ Delete
NAME STAACK, JAMES
STREET ADDRESS 121 N. OSCEOLA AVE.
CITY-ST-ZIP CLEARWATER FL 33764

TITLE VPD ☒ Delete
NAME NEAL, WM.
STREET ADDRESS 2232 GLENMOOR RD. N.
CITY-ST-ZIP CLEARWATER FL 33764

TITLE SD ☒ Delete
NAME HOFFMAN, ALYSE
STREET ADDRESS 3491 GANDY BLVD., SUITE 101
CITY-ST-ZIP PINELLAS PARK FL 33781

TITLE TD ☒ Delete
NAME LEEDS, FRANK
STREET ADDRESS 2301 3RD AVE. S.
CITY-ST-ZIP ST. PETERSBURG FL 33712

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE Pd ☒ Change ☐ Addition
NAME Christopher Wagner
STREET ADDRESS 1252 Holly Circle
CITY-ST-ZIP Oldsmar, FL 34677

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☒ Change ☐ Addition
NAME Wm. Zina
STREET ADDRESS 1712 Ridgeway Dr
CITY-ST-ZIP Clearwater, FL 33755

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☒ Change ☐ Addition
NAME Celeste Salanitri
STREET ADDRESS 7101 Park Street
CITY-ST-ZIP Seminole, FL 33777

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
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:

Jerry L. Conner Executive Director 04/14/00 (227) 399-9983

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #