

2001 UNIFORM BUSINESS REPORT (UBR)

FILED

May 03, 2001 8:00 am
Secretary of State

04-11-2001 90028 003 ****70.00

DOCUMENT # 769268

1. Entity Name

FRIENDS OF THE DEAF SERVICE CENTER, INC.

Principal Place of Business

Mailing Address

7100 70TH STREET N. 7545 83RD ST. N. P.O. BOX 2730
 PINELLAS PARK FL 33780 LARGO, FL 33777 PINELLAS PARK FL 33780
 US

2. Principal Place of Business

3. Mailing Address

7545 83RD ST. N.

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Largo, FL

Zip

Country

Zip

Country

33777 Pinellas

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
 7545 83RD N
 LARGO FL 33777

Name

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

City

FL

Zip Code

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 Executive Director
 Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

3/6/01
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 NAME STREET ADDRESS CITY-ST-ZIP	PD WAGNER, CHRISTOPHER 1252 HOLLY CIRCLE OLDSMAR FL 34677 <input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPD STAACK, JAMES 121 N. OSCEOLA AVE. CLEARWATER FL 33764 <input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPD ZINA, WM 1712 RIDGEWAY DR CLEARWATER FL 33755 <input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD SALANTIN, CELESTE 7101 PARK STREET SEMINOLE FL 33777 <input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete

TITLE NAME STREET ADDRESS CITY-ST-ZIP	President Nadeau, David 300 Cleveland Street Clearwater, FL 33755 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition D
TITLE NAME STREET ADDRESS CITY-ST-ZIP	First Vice President RJ Financial Legal Dept 880 Carillon Parkway St. Petersburg, FL 33716 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition D
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Second Vice President Suzanne Newman 12574 70th Street N. Largo, FL 33773 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition D
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Secretary Ben Smith 2305 N. Glenwood Dr. Tampa, FL 33602 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition D
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Treasurer Christian Poepsel Tech Data Corporation 5301 Tech Data Drive Clearwater, FL 33760 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition D
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Past President Wagner, Christopher 1252 Holly Circle Oldsmar, FL 34677 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition D

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 3/6/01 (727) 399-9983
 Signature and typed or printed name of signing officer or director Date Daytime Phone #

CR2E037 (10/00)