

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# F01000001647

FILED
Jan 15, 2002 8:00 AM
Secretary of State

Entity Name: DEAF DOG EDUCATION ACTION FUND, INC.

Current Principal Place of Business:

3516 55TH PLACE EAST
BRADENTON, FL 34203

New Principal Place of Business:

Current Mailing Address:

PO BOX 2840
ONECO, FL 342642840

New Mailing Address:

FEI Number: 94-3285109

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

EDWARDS, MYRA E
3516 55TH PLACE EAST
BRADENTON, FL 34203 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: CD () Delete
Name: NEWSTEAD, HOLLY
Address: 18550 APPIAN WAY
City-St-Zip: NAVARRO, CA 95463

Title: ED () Delete
Name: EDWARDS, MYRA E
Address: 3516 55TH PLACE EAST
City-St-Zip: BRADENTON, FL 34203

Title: AD () Delete
Name: BECKER, SUSAN C
Address: 2555 NEWTOWN ROAD
City-St-Zip: CINCINNATI, OH 45244

Title: D () Delete
Name: LARK, ROBBIE
Address: 78 SOUTH LIMERICK RD.
City-St-Zip: ROYERSFORD, PA 19468

Title: S () Delete
Name: GONZALEZ, SUSAN
Address: 507 MASONIC, #2
City-St-Zip: SAN FRANCISCO, CA 94117

Title: DF () Delete
Name: EDWARDS, JOHN L
Address: 3516 55TH PLACE EAST
City-St-Zip: BRADENTON, FL 34203 N

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: S (X) Change () Addition
Name: LAUS, JENNIFER
Address: 2127 HAMPTON ROAD
City-St-Zip: GROSSE POINTE WOODS, MI 48236

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

I hereby certify that the information supplied with this filing does not qualify for the 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 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: MYRA ELLIS EDWARDS

ED

01/15/2002

Electronic Signature of Signing Officer or Director

Date

SALLY STEWART, D. OF PUBLIC INFORMATION
1902 WOODWARD AVE.
PITTSBURGH, PA 15226

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