

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03956

FILED
Apr 14, 2005
Secretary of State

Entity Name: DEAF SERVICE CENTER OF PALM BEACH COUNTY, INC.

Current Principal Place of Business:

3111 S. DIXIE HWY
237
W.PALM BCH., FL 33405 US

New Principal Place of Business:

Current Mailing Address:

3111 S. DIXIE HWY
237
W.PALM BCH., FL 33405 US

New Mailing Address:

FEI Number: 59-2433417 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

GINDLESPERGER, JOAN E.
3111 S. DIXIE HWY
STE. 237
W.PALM BCH., FL 33405 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: LANDOLFI, JOSEPH M JR
Address: 2600 N MILITARY TRAIL
City-St-Zip: BOCA RATON, FL 33431

Title: D () Delete
Name: BRANCH, LYNN C
Address: 104 WATERFORD DR
City-St-Zip: JUPITER, FL 33458

Title: VD () Delete
Name: BORRO, MICHELLE
Address: 1545 N MILITARY TRL.
City-St-Zip: JUPITER, FL 33458

Title: M () Delete
Name: GINDLESPERGER, JOAN E
Address: 3111 S DIXIE HIGHWAY #237
City-St-Zip: W PALM BEACH, FL 33405

Title: SD () Delete
Name: PELTZIE, KENNETH G
Address: 2260 RABBIT HOLLOW CIRCLE
City-St-Zip: DELRAY BEACH, FL 33445

Title: S (X) Delete
Name: HOWARD, VIRGIL E
Address: 6340 TALL CYPRESS CIR.
City-St-Zip: LAKE WORTH, FL 33463

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: SD (X) Change () Addition
Name: SIMNICK, CHRISTOPHER A
Address: 1801 S AUSTRALIAN AVE
City-St-Zip: WEST PALM BEACH, FL 33409

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

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

Title: S (X) Change () Addition
Name: HOWARD, VIRGIL E
Address: 6340 TALL CYPRESS CIR
City-St-Zip: LAKE WORTH, FL 33463

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: JOAN E GINDELSPERGER

M

04/14/2005

Electronic Signature of Signing Officer or Director

Date