

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000006794

FILED
Apr 23, 2009
Secretary of State

Entity Name: AMERICAN COLLEGE OF EDUCATORS/DEAF AND HARD OF HEARING, INC.

Current Principal Place of Business:

34 ST. FRANCIS ST.
ST. AUGUSTINE, FL 32084

New Principal Place of Business:

501 20TH ST
CAMPUS BOX 141
GREELEY, CO 80639

Current Mailing Address:

34 ST. FRANCIS ST.
ST. AUGUSTINE, FL 32084

New Mailing Address:

501 20TH ST
CAMPUS BOX 141
GREELEY, CO 80639

FEI Number: 82-0188549

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FINNEGAN, MARGARET
34 ST. FRANCIS ST.
ST. AUGUSTINE, FL 32084 US

Name and Address of New Registered Agent:

CHRISTOPHER SPRINGHORN CPA PA
601-C PONCE DE LEON BLVD S
ST. AUGUSTINE, FL 32084 US

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: CHRISTOPHER SPRINGHORN

04/23/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: DR. () Delete
Name: BENHAM, NANCY
Address: INDIANA UNIVERSITY OF PENNSYLVANIA
City-St-Zip: INDIANA, PA 15705 US

Title: S () Delete
Name: STEIN, KAREN
Address: MOOG CTR., 12300 S. FORTY DR.
City-St-Zip: ST. LOUIS, MO 631418820 US

Title: T (X) Delete
Name: FINNEGAN, MARGARET
Address: 34 ST. FRANCIS ST.
City-St-Zip: ST. AUGUSTINE, FL 32084

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRES (X) Change () Addition
Name: BOWEN, SANDY
Address: 501 20TH ST
City-St-Zip: GREELEY, CO 80639 US

Title: TR (X) Change () Addition
Name: BUISSON, GERALD
Address: 118 COLLEGE DR #5092
City-St-Zip: HATTIESBURG, MS 39406 US

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

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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: GERALD BUISSON

TRES

04/23/2009

Electronic Signature of Signing Officer or Director

Date