

2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000006794

FILED
Apr 23, 2012
Secretary of State

Entity Name: ASSOCIATION OF COLLEGE EDUCATORS DEAF AND HARD-OF-HEARING, INC.

Current Principal Place of Business:

601 PONCE DE LEON BLVD S
SUITE C
ST AUGUSTINE, FL 322084 US

New Principal Place of Business:

Current Mailing Address:

601 PONCE DE LEON BLVD S
SUITE C
ST AUGUSTINE, FL 322084 US

New Mailing Address:

FEI Number: 20-4643984

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CHRISTOPHER SPRINGHORN CPA PA
601-C PONCE DE LEON BLVD S
ST. AUGUSTINE, FL 32084 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: PRES
Name: ALLMAN, TAMBY
Address: 601C PONCE DE LEON BLVD S
City-St-Zip: ST AUGUSTINE, FL 32084 US

Title: TR
Name: SUSAN, LANE-OUTLAW
Address: 601C PONCE DE LEON BLVD S
City-St-Zip: ST AUGUSTINE, FL 32086 US

I hereby 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 all other like empowered.

SIGNATURE: TAMBY ALLMAN

PRES

04/23/2012

Electronic Signature of Signing Officer or Director

Date