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Mar 02 1998 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1998



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # N05672 (3)
1. Corporation Name
DEAF SERVICE CENTER OF MANATEE-SARASOTA COUNTIES, INC.



Principal Place of Business: 5107 14TH ST WEST BRADENTON FL 34207-9431
Mailing Address: 5107 14TH ST WEST BRADENTON FL 34207-9431

3. Date Incorporated or Qualified: 10/15/1984
4. FEI Number: 59-2586832
Applied For: Not Applicable:

2. Principal Place of Business (21-24) and 2a. Mailing Address (25-30) fields for Suite, Apt. #, etc., City & State, Zip, and Country.

6. Certificate of Status Desired: \$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution: \$5.00 May Be Added to Fees
7. Is this nonprofit corporation a homeowners association?: Yes No
8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30.: Yes No

9. Name and Address of Current Registered Agent
LYNCH, WILLIAM F.
2731 72 ST COURT W
BRADENTON FL 34209

10. Name and Address of New Registered Agent
81 Name: O'Hara, Michael
82 Street Address (P.O. Box Number is Not Acceptable): 4032 Redrock Lane
83 Signature: *Michael J. O'Hara*
84 City: Sarasota FL 85 Zip Code: 34231

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.
SIGNATURE: *Michael J. O'Hara* PRESIDENT OF DSC, MIS

12. OFFICERS AND DIRECTORS

TITLE	PD	<input checked="" type="checkbox"/> DELETE
NAME	LYNCH, WILLIAM F	
STREET ADDRESS	2731 72ND ST. CT. W	
CITY-ST-ZIP	BRADENTON FL	
TITLE	VP	<input checked="" type="checkbox"/> DELETE
NAME	O'HARA, MICHAEL	
STREET ADDRESS	4032 REDROCK LANE	
CITY-ST-ZIP	SARASOTA FL	
TITLE	SD	<input type="checkbox"/> DELETE
NAME	WALKER, GRISSIM H JR	
STREET ADDRESS	430 12TH ST W	
CITY-ST-ZIP	BRADENTON FL	
TITLE	TD	<input type="checkbox"/> DELETE
NAME	CRAIG, JIM	
STREET ADDRESS	1549 RINGLING BLVD	
CITY-ST-ZIP	SARASOTA FL 34236	
TITLE	ED	<input type="checkbox"/> DELETE
NAME	WIBLITZHouser, SHARON	
STREET ADDRESS	5107 14TH STREET W.	
CITY-ST-ZIP	BRADENTON FL 34207	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	PD	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	O'Hara, Michael	
1.3 STREET ADDRESS	4032 Redrock Lane	
1.4 CITY-ST-ZIP	Sarasota, Fl	
2.1 TITLE	VP	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
2.2 NAME	Noel Crosby	
2.3 STREET ADDRESS	1961 Floyd St. Suite D	
2.4 CITY-ST-ZIP	Sarasota, Fl	
3.1 TITLE	SD	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
3.2 NAME	Debbie Westmoreland	
3.3 STREET ADDRESS	8523 10th Avenue N.W.	
3.4 CITY-ST-ZIP	Bradenton, Fl	
4.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME		
4.3 STREET ADDRESS		
4.4 CITY-ST-ZIP		
5.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY-ST-ZIP		
6.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME		
6.3 STREET ADDRESS		
6.4 CITY-ST-ZIP		

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(l), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.
SIGNATURE: *Sharon W. Wiblitzhouser* 1-12-98 941-758-2539

CP2E037 (10/97)