

2001 UNIFORM BUSINESS REPORT (UBR)

1/22/01-

FILED Feb 19, 2001 8:00 am Secretary of State

01-22-2001 90026 003 ****70.00

DOCUMENT # N05672

1. Entity Name

DEAF SERVICE CENTER OF MANATEE-SARASOTA COUNTIES



Principal Place of Business

5107 14TH ST WEST BRADENTON FL 34207-9431

Mailing Address

5107 14TH ST WEST BRADENTON FL 34207-9431



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

59-2586832

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

WESTMORELAND, DEBBIE 8523 10TH AVENUE N.W. BRADENTON FL 34209

Name

Jim Craig

1549 Ringling Blvd

Sarasota

City

FL

Zip Code 34236

8. 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

Signature of James A. Craig, President

1/8/01

FILE NOW: FEE IS \$61.25

9. Election Campaign Financing Trust Fund Contribution.

\$5.00 May Be Added to Fees

Make Check Payable to Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TD CARPENTER, SCOTT 5017 72ND CT E BRADENTON FL 34203

PD President Jim Craig 1549 Ringling Blvd. Sarasota, FL 34236

SD MARGARGLE, BROOKE 1961 FLOYD ST STE D SARASOTA FL 34236

VD Vice President Norm Davidson 1523 1st Avenue West Bradenton, FL 34205

PD WESTMORELAND, DEBBIE 8523 10TH AVE N W BRADENTON FL

SD Secretary Jeff Peairs 1750 Ringling Blvd. Sarasota, FL 34236

VP CRAIG, JIM 1549 RINGLING BLVD SARASOTA FL 34236

(Empty entry for additions/changes)

ED WIBLITZHouser, SHARON 5107 14TH STREET W. BRADENTON FL 34207

(Empty entry for additions/changes)

(Empty entry for officers/directors)

(Empty entry for additions/changes)

12. I hereby certify that the information supplied with this filing does not qualify 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 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 10 or Block 11 if changed, or on an attachment with an address, with all other like information.

SIGNATURE:

Signature of Sharon W. Blitzhouser

1/8/01

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (10/00)