

**2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

**FILED  
Feb 07, 2006  
Secretary of State**

DOCUMENT# N05672

**Entity Name:** COMMUNITY CENTER FOR THE DEAF AND HARD OF HEARING OF MANATEE-SARASOTA, INC.

**Current Principal Place of Business:**

5107 14TH ST WEST  
BRADENTON, FL 342079431

**New Principal Place of Business:**

5107 14TH ST WEST  
BRADENTON, FL 342079431 US

**Current Mailing Address:**

5107 14TH ST WEST  
BRADENTON, FL 342079431

**New Mailing Address:**

5107 14TH ST WEST  
BRADENTON, FL 342079431 US

FEI Number: 59-2586832      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

ELLIS, JIM  
706 39TH ST W  
BRADENTON, FL 34205 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: SD ( ) Delete  
Name: KENDZIOR, RACHEL  
Address: 3739 59TH AVE CIRCLE E  
City-St-Zip: ELLENTON, FL 34222

Title: PD ( ) Delete  
Name: ELLIS, JAMES M  
Address: 706 39TH WEST  
City-St-Zip: BRADENTON, FL 34205

Title: ED ( ) Delete  
Name: WAGNER, CHRISTOPHER D  
Address: 5107 14TH STREET W.  
City-St-Zip: BRADENTON, FL 34207

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: SD (X) Change ( ) Addition  
Name: KENDZIOR, RACHEL  
Address: 3739 59TH AVE CIRCLE E  
City-St-Zip: ELLENTON, FL 34222 US

Title: PD (X) Change ( ) Addition  
Name: ELLIS, JAMES M  
Address: 706 39TH WEST  
City-St-Zip: BRADENTON, FL 34205 US

Title: ED (X) Change ( ) Addition  
Name: WAGNER, CHRISTOPHER D  
Address: 5107 14TH STREET W.  
City-St-Zip: BRADENTON, FL 34207 US

I hereby certify that the information supplied with this filing does not qualify for the 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: CHRISTOPHER D. WAGNER

ED

02/07/2006

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date