2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08000001550

FILED Jan 09, 2009 Secretary of State

Entity Name: NORTHEAST FLORIDA ASSOCIATION FOR THE DEAF, INCORPORATION

Current Principal Place of Business: New Principal Place of Business:

26 LEMA LANE 26 LEMA LANE

PALM COAST, FL 32137 PALM COAST, FL 32137 US

Current Mailing Address: New Mailing Address:

26 LEMA LANE PO BOX 4402

PALM COAST, FL 32137 SAINT AUGUSTINE, FL 32085 US

FEI Number: 61-1548557 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

HODGSON, DEREK M CERASOLI, WALTER 720 WYNFIELD CIRCLE

PALM COAST, FL 32137 US SAINT AUGUSTINE, FL 32092 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: WALTER CERASOLI 01/09/2009

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

itle: PRES () Delete Title: PRES (X) Change () Addition

 Name:
 HODGSON, DEREK M
 Name:
 D'ANGELO, TOM

 Address:
 26 LEMA LANE
 Address:
 4300 TURNBULL DRIVE

City-St-Zip: PALM COAST, FL 32137 City-St-Zip: SAINT AUGUSTINE, FL 32092 US

Title: VP () Delete Title: VP (X) Change () Addition

 Name:
 MCFEE, DAVID
 Name:
 HIGGINS, MICHAEL

 Address:
 320 SUMMER BREEZE WAY #2101
 Address:
 64 PIN OAK DRIVE

City-St-Zip: ST.. AUGUSTINE, FL 32086 City-St-Zip: PALM COAST, FL 32164 US

Title: TREA () Delete Title: SECY (X) Change () Addition Name: WENTELA, CHRISTOPHER Name: HODGSON, KAREN

Address: 52 PINE CREST LANE Address: 26 LEMA LANE

City-St-Zip: PALM COAST, FL 32164 City-St-Zip: PALM COAST, FL 32137 US

Title: SEC () Delete Title: TREA (X) Change () Addition

Name: HIGGINS, MICHAEL Name: THOMAS, JAMES

Address: 64 PIN OAK DRIVE Address: 121 PINE LAKE PARKWAY NORTH APT# 907

City-St-Zip: PALM COAST, FL 32164 City-St-Zip: PALM COAST, FL 32137 US

Title: BD () Delete Title: BD (X) Change () Addition

Name: WOOMER, JENNIFER Name: SCHNECK, CARL
Address: 2247 FORT MELLON COURT Address: 3572 CARMEL STREET

City-St-Zip: ST. AUGUSTINE, FL 32092 City-St-Zip: SAINT AUGUSTINE, FL 32086 US

Title: BD () Delete Title: BD (X) Change () Addition
Name: D'ANGELO, TOM Name: HATTON, ARNOLD

 Name:
 D'ANGELO, TOM
 Name:
 HATTON, ARNOLD

 Address:
 2912 CASTNET COURT
 Address:
 PO BOX 311

 City-St-Zip:
 ST. AUGUSTINE, FL 32092
 City-St-Zip:
 HASTINGS, FL 32145 US

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: TOM D'ANGELO PRES 01/09/2009

Toner, Sean

From: WCERASOLI43@aol.com

Sent:

Thursday, January 22, 2009 11:25 AM

To:

Toner, Sean

Subject: Doc # N08000001550

Mr. Toner,

NorthEast Florida Association for the Deaf, Inc.

Document # N08000001550

Filed

1/2/09

Add 1

Title: Board

Name: Montagnino, Michael

Address: 2433 Caparina Drive

Saint Augustine, FL

32092 US

Thank you,

Walter Cerasoli. Registered Agent.

A Good Credit Score is 700 or Above. See yours in just 2 easy steps!