

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N23067

FILED  
Apr 30, 2012  
Secretary of State

**Entity Name:** DEAF SERVICE CENTER ASSOCIATION, INC.

**Current Principal Place of Business:**

8610 GALEN WILSON BLVD  
PORT RICHEY, FL 34668

**New Principal Place of Business:**

1219 DUNN AVE  
DAYTONA BEACH, FL 32114

**Current Mailing Address:**

8610 GALEN WILSON BLVD  
PORT RICHEY, FL 34668

**New Mailing Address:**

1219 DUNN AVE  
DAYTONA BEACH, FL 32114

**FEI Number:** 65-0014595

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

THOMAS, JEFFREY A  
DEAF AND HARD OF HEARING SERVICES OF FLA.  
8610 GALEN WILSON BLVD.  
PORT RICHEY, FL 34668 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: P  
Name: SINNOTT, LYNN A  
Address: 1219 DUNN AVE  
City-St-Zip: DAYTONA BEACH, FL 32114

Title: SEC  
Name: TAMBASCO, MAUREEN  
Address: 103 N.E. CRYSTAL ST  
City-St-Zip: CRYSTAL RIVER, FL 34428

Title: TREA  
Name: CHURCH, JULIE  
Address: 6883 102ND AVENUE NORTH  
City-St-Zip: PINELLAS PARK, FL 33782

Title: VP  
Name: THOMAS, JEFFREY A  
Address: 8610 GALEN WILSON BLVD  
City-St-Zip: PORT RICHEY, FL 34668

Title: D  
Name: GAUT, KIM  
Address: 25250 SANDHILL BLVD  
City-St-Zip: PUNTA GORDA, FL 33983

Title: D  
Name: CARLTON, DONNA  
Address: 1750 17TH STREET BUILDING F  
City-St-Zip: SARASOTA, FL 34234

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: JEFFREY A THOMAS

VP

04/30/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date