


FILE NOW: FILING FEE IS \$61.25

FILED

Jan 31 1997 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1997	 FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
--	---

DOCUMENT # **N31152** (4)

1. Corporation Name

BIG SUN ASSOCIATION OF THE DEAF, INC.

Principal Place of Business

Mailing Address

**1000 NE 44 STR
OCALA FL 34478
US**

**1000 NE 44TH STREET
OCALA FL 34479-1952
US**



3. Date Incorporated or Qualified **03/13/1989** 3a. Date of Last Report **03/22/1996**

2. Principal Place of Business

2a. Mailing Address

21 **320 N.W. 56 AVE**

26 **SAME**

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23 **OCALA, FLORIDA**

28

Zip

Country

Zip

Country

24 **34482**

25

MARION

29

30

4. FEI Number

59-2892632

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

6. Election Campaign Financing
Trust Fund Contribution ☐

**\$5.00 May Be
Added to Fees**

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**DEAN, H. EDWARD
230 NE 25TH AVE
OCALA FL 32670**

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

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

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE **PD** ☒ DELETE
NAME **CARTER, GARY**
STREET ADDRESS **5030 SE 30TH ST APT D**
CITY-ST-ZIP **OCALA FL**

1.1 TITLE **PD** ☒ Change ☐ Addition
1.2 NAME **ARON L. Henderson**
1.3 STREET ADDRESS **2620 S.E. 67th St. Road # 16**
1.4 CITY-ST-ZIP **OCALA FLORIDA 34480**

TITLE **VD** ☒ DELETE
NAME **GIGUERE, SANDRA**
STREET ADDRESS **5030 SE 30TH ST APT D**
CITY-ST-ZIP **OCALA FL**

2.1 TITLE **VD** ☒ Change ☐ Addition
2.2 NAME **GARY D. Metcalf**
2.3 STREET ADDRESS **27 Pecan Drive Loop**
2.4 CITY-ST-ZIP **OCALA FLORIDA 34472**

TITLE **SD** ☒ DELETE
NAME **METCALF, COLLEEN**
STREET ADDRESS **5971 WEST GROVE PK RD**
CITY-ST-ZIP **DUNNELLON FL**

3.1 TITLE **SD** ☒ Change ☐ Addition
3.2 NAME **SANDRA J. GIGUERE**
3.3 STREET ADDRESS **5030 S.E. 30th St. APT D**
3.4 CITY-ST-ZIP **OCALA FLORIDA 34471**

TITLE **TD** ☒ DELETE
NAME **VIVALOI, MIGUEL A JR**
STREET ADDRESS **1000 NE 44 STR**
CITY-ST-ZIP **OCALA FL**

4.1 TITLE **TD** ☒ Change ☐ Addition
4.2 NAME **ALESIA Y. GREEN**
4.3 STREET ADDRESS **320 N.W. 56 AVE.**
4.4 CITY-ST-ZIP **OCALA FLORIDA 34482**

TITLE **T** ☐ DELETE
NAME **KONICKI, JIM**
STREET ADDRESS **1735 SE 108 AVE**
CITY-ST-ZIP **SUMMERFIELD FL**

5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

14. I do 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 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: **Alesia Y. Green** REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

January 12, 1997 (352) 732-3744

CR2E037 (9/96)