

2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 23, 2003 8:00 am
Secretary of State

04-23-2003 90272 014 ****61.25

DOCUMENT # N39587

1. Entity Name
GREATER TAMPA BAY ASSOCIATION OF THE DEAF, INC.



Principal Place of Business

**12574 70TH ST. NORTH
LARGO FL 33773**

Mailing Address

**12574 70TH ST. NORTH
LARGO FL 33773**

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

Zip

Country

3. Mailing Address

Suite, Apt. #, etc.

City & State

Zip

Country

4. FEI Number **NOT APPLICABLE**

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

☐ CHECK HERE IF MAKING CHANGES



6. Name and Address of Current Registered Agent

**NEWMAN, TERRY
12574 70TH STREET NORTH
LARGO FL 33773**

7. Name and Address of New Registered Agent

Name

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

City

FL

Zip Code

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE: *Terry Newman*
Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

4-21-03

FILE NOW: FEE IS \$61.25

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

**Make Check Payable to
Florida Department of State**

10. OFFICERS AND DIRECTORS

TITLE	P	<input checked="" type="checkbox"/> Delete
NAME	DAWN, ANSPACH	
STREET ADDRESS	13300 WAHSINGTON RD STE 169	
CITY-ST-ZIP	LARGO FL 33774	
TITLE	VP	<input checked="" type="checkbox"/> Delete
NAME	PATTERSON, MIKE	
STREET ADDRESS	1277 MAGONLIA DR	
CITY-ST-ZIP	CLEARWATER FL 33756	
TITLE	SD	<input checked="" type="checkbox"/> Delete
NAME	BAUER, ANDREA	
STREET ADDRESS	679 SEDGWICK WAY	
CITY-ST-ZIP	PALM HARBOR FL 34683	
TITLE	TD	<input type="checkbox"/> Delete
NAME	ELMORE, MARIA	
STREET ADDRESS	7081 44TH STREET N.	
CITY-ST-ZIP	PINELLAS PARK FL 33781	
TITLE	AD	<input checked="" type="checkbox"/> Delete
NAME	SCOTT, FARRELL	
STREET ADDRESS	4130 NW 88 AVE SPT 2020	
CITY-ST-ZIP	POMPANO BEACH FL 33065	
TITLE	PD	<input type="checkbox"/> Delete
NAME	PIPER, BRANDIE	
STREET ADDRESS	4500 80TH AVE N	
CITY-ST-ZIP	PINELLAS PARK FL 33781	

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	President	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Bauer, Andrea	
STREET ADDRESS	679 Sedgewick Way	
CITY-ST-ZIP	Palm Harbor, FL 34683	
TITLE	Vice President	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Matt Barnhart	
STREET ADDRESS	3093 Webley Dr.	
CITY-ST-ZIP	Largo, FL 33771	
TITLE	Secretary	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Louis Roman	
STREET ADDRESS	705 E. 114th Ave.	
CITY-ST-ZIP	Tampa, FL 33612	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE	Athletic Director	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Michael Rutledge	
STREET ADDRESS	12545 70th St.	
CITY-ST-ZIP	Largo, FL 33773	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

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 empowered.

SIGNATURE: *Andrea Bauer*

April 21, 2003

727-522-1777(tdd)

CR2E037 (10/02)