FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT

1998



PLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

FILED

Jan 16 1998 8:00am

Secretary of State

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # N9600001394 (3)

TAMPA BAPTIST DEAF CHURCH, INC.

Principal Place of Business		Mailing Address					
300 EAST SLIGH AVENUE		300 EAST SLIGH AVENUE		3. Date Incorporated or Qualified			
TAMPA FL 33604		TAMPA FL 33604		03/11/1996			
					4. FEI Number	A	pplied For
					59-3411865	N	ot Applicable
2. Principal Place of Business 2a. Mailing Address					5. Certificate of Status Desired		Additional
21	# -4-	Suite, Apt. #, etc.	ant # etc				lequired
Suite, Apt.	#, etc.	27			6. Election Campaign Financing Trust Fund Contribution	\$5.00 Added t	
City & State		City & State		7. Is this nonprofit corporation a homeowner	· · · ·		
23		28				□No	
Zip	Country	Zip	Country		8. This corporation owes or has paid the cu		
24	25		30				□ No
	9. Name and Address of Curren	t Registered Agent	81	Name	10. Name and Address of New Registered	Agent	
1			81	name			
CARRERA, LLOYD 4314 AKITA DRIVE			82	Street A	ddress (P.O. Box Number is Not Acceptable)		
1	TL 33625		83				
IAMEA	TE 30023			<u> </u>		ac 7in	Code
				City	FL	_ '	-
11. Pursuant	to the provisions of Sections 617.050	2 and 617.1508, Florida Statute	s, the above-r	named o	corporation submits this statement for the purpose o oration's board of directors. I hereby accept the app	f changing in	its registered
agent. I a	in familiar with, and accept the obliga	ations of, Section 617.0503, Flor	rida Statutes.	~ COID	oralion's board of directors. Thereby accept the app		, inglocolor
SIGNATURE .		<u></u>	yd C.	Car	Rera tastor 1/1/	18	
12.	Signature, typed or printed name of registered age OFFICERS AN		Registered Agent	signature n	equired when reinstating) DATÉ ADDITIONS/CHANGES TO OFFICERS AND	DIRECTO	RS IN 12
TITLE	VD OT TOURS AND	DELETE	1.1 TITLE			☐ Change	Addition
NAME	ROBERTS, GEORGE		1.2 NAME				
STREET ADDRESS	The state of the s		1.3 STREET AL	DDRESS			
CITY-ST-ZIP	LARGO FL 34644		1.4 CITY - ST-	ŽIP	3		
TITLE	≴ TD	☐ DELETE	2.1 TITLE		T/O	Change	Addition
NAME	HORTON, LINDA		2.2 NAME		Horton, Linda 15322 Hutchiwson Rd		=
STREET ADDRESS	15322 HUTCHINSON RD.		2.3 STREET AL	DERESS			
CITY-ST-ZIP	TAMPA FL		2. 4 CITY - ST-	ZIP	Tampa FL	Change	Addition
TITLE	PD	☐ DELETE	3.1 TITLE		•	[_] Criange	Addition
NAME	CARRERA, LLOYD		3.2 NAME	22220			
STREET ADDRESS	4314 AKITA DRIVE		3.3 STREET AL 3.4, CITY-ST-	į.			
CITY-ST-ZIP	TAMPA FL 33625	DELETE	4,1 TITLE		S/TR	Change	Addition
NAME		_	4. 2 NAME		JACKSON, CATHY M.		
STREET ADDRESS			4.3 STREET AL	DERESS	7318 N. Dartmouth Ave		
CITY-ST-ZIP			4.4 CITY-ST-ZIP		TAMPA FL 33604-4058	š	
TITLE		DELETE	5.1 TITLE		S/TR	Change	∠ Addition
NAME			5.2 NAME		SURRENCY, STEVEN		-
STREET ADDRESS			5.3 STREET AL	- 1	5109 Twin Pine DR		
CITY-ST-ZIP			5.4 CITY - ST-	ZIP	PLANT CITY FL 3356		Addista-
TITLE		DELETE	6.1 TITLE			∐ Change	Addition
NAME			6.2 NAME				
STREET ADDRESS			6.3 STREET AL	IDRESS			

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f). 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 employment of the exemption 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 preddress.

SIGNATURE:

SI