2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 23, 2004 8:00 am
Secretary of State
04-23-2004 90275 007 ****61.25

DOCUMENT # N98000002052

1. Entity Name
DEAF EXPERIENCE ASSOCIATION, INC.

Principal Place of Business	Mailing Address
1310 N MAIN ST SUITE 103 KISSIMMEE, FL 34744	1310 N MAIN ST SUITE 103 KISSIMMEE, FL 34744

03312004 Chg-NP CR2E037 (10/03)

2. Principal Place of Business	3. Mailing Address
3700 Commerce Blvd.	3700 Commerce Blvd.
Suite Apt. #, etc. 134	Suite Apt. #, etc. 134
City & State Kissimmee, FL	City & State Kissimmee, FL
Zip 34741-4656 Country U.S.A.	Zip 34741-4656 Country U.S.A.

4. FEI Number 59-3504378 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

CUEVAS, OLETHA
3545 PINERIDGE CIRCLE
KISSIMMEE, FL 34746

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 _____ DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

Filing Fee is $61.25
Due by May 1, 2004

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			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	P RODRIGUEZ, JULIO 2100 POLO CLUB DR APT 103 KISSIMMEE, FL 347412310	☒ Delete	P SCHOOLEY, JAMES 579 FLORAL DR KISSIMMEE, FL 34743	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	V SCHOOLEY, JAMES C 579 FLORAL DR KISSIMMEE, FL 34743	☒ Delete	V VEGA, REINALDO J 2806 OSPREY COVE PL #102 KISSIMMEE, FL 34746	☑ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	S RIVERA, MELISSA 2100 POLO CLUB DR APT 103 KISSIMMEE, FL 34741	☒ Delete	S VEGA, REINALDO J 2806 OSPREY COVE PL #102 KISSIMMEE, FL 34746	☐ Change ☑ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	T FEINBAUM, CHRISTINE 1161 NORMANDY DRIVE KISSIMMEE, FL 34759	☐ Delete		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D ROTH, ANGELA 1310 N MAIN STREET STE 101 KISSIMMEE, FL 34744	☐ Delete	D ROTH, ANGELA 3700 COMMERCE BLVD. SUITE 108 KISSIMMEE, FL 34741-4656	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D VEGA, REINALDO J 3838 NAUTICAL WAY #104 KISSIMMEE, FL 34741	☒ Delete	D MOLLINEDO, TARA 3700 COMMERCE BLVD. SUITE 108 KISSIMMEE, FL 34741-4656	☒ Change ☐ Addition

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: Jan C Schooley 4/19/04 407-518-9050 TDD
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #