

7-30-97 B-8068 C

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 17, 1997  
 AMOUNT DUE ON OR BEFORE 9/17/97: \$61.26 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$236.25).

FILED

Jul 30 1997 8:00am  
 Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT <b>1997</b>		FLORIDA DEPARTMENT OF STATE <b>Sandra B. Mortham</b> Secretary of State DIVISION OF CORPORATIONS
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**DOCUMENT # 710179 (3)**

1. Corporation Name  
**JENSEN BEACH CHAMBER OF COMMERCE, INC.**



Principal Place of Business 1910 N.E. JENSEN BEACH BLVD. JENSEN BEACH FL 34957	Mailing Address 1910 N.E. JENSEN BEACH BLVD. JENSEN BEACH FL 34957
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 21 Suite, Apt. #, etc. 22 City & State 23 Zip 24 Country	2a. Mailing Address 26 Suite, Apt. #, etc. 27 City & State 28 Zip 29 Country
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3. Date Incorporated or Qualified 01/07/1966	3a. Date of Last Report 03/27/1996
4. FEI Number 59-0682897	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent

**MIRANDA, REY**  
 1910 NE JENSEN BEACH BLVD  
 JENSEN BEACH FL 34957

10. Name and Address of New Registered Agent

B1 Name	B2 Street Address (P.O. Box Number is Not Acceptable)	B3	B4 City	B5 Zip Code
			FL	

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 *Miranda Rey* **MIRANDA** 7/22/97  
 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
TITLE	P HARTMANN, RAY 1910 N.E. JENSEN BEACH BLVD. JENSEN BEACH FL 34957	<input checked="" type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	VP HAVEN, RON 1910 N.E. JENSEN BEACH BLVD. JENSEN BEACH FL 34957	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
STREET ADDRESS	T HALEY, GEORGE 1910 N.E. JENSEN BEACH BLVD. JENSEN BEACH FL 34957	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
CITY-ST-ZIP	SD CHASON, MIKE 1910 N.E. JENSEN BEACH BLVD. JENSEN BEACH FL 34957	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE	D TRUDEL, JAN 1910 N.E. JENSEN BEACH BLVD. JENSEN BEACH FL 34957	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	D PERRIS, JERRY 1910 N.E. JENSEN BEACH BLVD. JENSEN BEACH FL 34957	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
STREET ADDRESS		
CITY-ST-ZIP		

1.1 TITLE	P HARTMANN, RAY
1.2 NAME	VP HAVEN, RON
1.3 STREET ADDRESS	T HALEY, GEORGE
1.4 CITY-ST-ZIP	SD CHASON, MIKE
2.1 TITLE	D TRUDEL, JAN
2.2 NAME	D PERRIS, JERRY
2.3 STREET ADDRESS	
2.4 CITY-ST-ZIP	
3.1 TITLE	
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY-ST-ZIP	
4.1 TITLE	
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP	
5.1 TITLE	
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	
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 *Miranda Rey* **MIRANDA** 7/22/97 811-334-3444

CR2E037 (4/97)