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NONPROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 748308

1. Corporation Name

**PINELLAS PARK/MID-COUNTY CHAMBER OF COMMERCE, IN
C.**

Principal Place of Business

5851 PARK BLVD.
PINELLAS PARK FL 33781
US

Mailing Address

5851 PARK BLVD.
PINELLAS PARK FL 33781
US



2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip

Country

24

25

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip

Country

29

30

3. Date Incorporated or Qualified

08/01/1979

4. FEI Number

59-1937179

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

9. Name and Address of Current Registered Agent

BOTT, RITA
5851 PARK BLVD.
PINELLAS PARK FL 33781

10. Name and Address of New Registered Agent

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

Nancy A. Hodges
Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE D ☐ DELETE
NAME HODGES, NANCY
STREET ADDRESS 6825 38TH STREET
CITY-ST-ZIP PINELLAS PARK FL 33781

TITLE V ☒ DELETE
NAME BOTT, RITA G
STREET ADDRESS 5851 PK BLVD
CITY-ST-ZIP PINELLAS PK. FL 00000

TITLE D ☐ DELETE
NAME ENGLAND, TERRY
STREET ADDRESS 12255 75TH ST. NORTH
CITY-ST-ZIP LARGO FL 33773

TITLE D ☐ DELETE
NAME PIGNATELLO, DR DAVE
STREET ADDRESS 7925 66TH STREET
CITY-ST-ZIP PINELLAS FL 33781

TITLE DP ☐ DELETE
NAME KANNER, MENI
STREET ADDRESS 5010 PARK BLVD.
CITY-ST-ZIP PINELLAS PARK FL 33781

TITLE D ☒ DELETE
NAME CHANDLER, LARRY
STREET ADDRESS 7600 US 19
CITY-ST-ZIP PINELLAS PARK FL

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP

2.1 TITLE ☐ Change ☒ Addition
2.2 NAME Pres. Jeanne McGinty
2.3 STREET ADDRESS 9747 66 Street N
2.4 CITY-ST-ZIP Pinellas Park, FL 33782

3.1 TITLE ☐ Change ☐ Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

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

6.1 TITLE ☐ Change ☒ Addition
6.2 NAME Richard Kusmierczyk
6.3 STREET ADDRESS 6460 35 Street N
6.4 CITY-ST-ZIP Pinellas Park, FL 33781

14. 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 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, with all other like empowered.

SIGNATURE:

SIGNATURE REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (11/98)