

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED
Apr 30, 2004
Secretary of State**

DOCUMENT# 768069

Entity Name: FROSTPROOF AREA CHAMBER OF COMMERCE, INC.

Current Principal Place of Business:

118 EAST WALL ST
FROSTPROOF, FL 33843 US

New Principal Place of Business:

Current Mailing Address:

PO BOX 968
FROSTPROFF, FL 33843

New Mailing Address:

FEI Number: 59-2319193 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HEATH, STELLA C
118 EAST WALL STREET
FROSTPROOF, FL 33843 US

Name and Address of New Registered Agent:

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.

SIGNATURE: _____

Electronic Signature of Registered Agent

_____ Date

OFFICERS AND DIRECTORS:

Title: SD () Delete
Name: HUTZELMAN, KAY
Address: 755 N. LK. REEDY BLVD.
City-St-Zip: FROSTPROOF, FL 33843

Title: T () Delete
Name: HOOD, LISA L
Address: 10 C STREET
City-St-Zip: FROSTPROOF, FL 33843

Title: VPD (X) Delete
Name: HADDEN, M CHERYL
Address: 511 WOOD AVENUE
City-St-Zip: FROSTPROOF, FL 33843

Title: D () Delete
Name: TROUTMAN, BAXTER
Address: 318 KENDALL DRIVE
City-St-Zip: WINTER HAVEN, FL 33884

Title: PD () Delete
Name: GRIFFIN, HILL
Address: ONE BRACRES LANE, PO BOX 266
City-St-Zip: FROSTPROOF, FL 33843

Title: D () Delete
Name: WATERS, RALPH
Address: 333 WEST F STREET
City-St-Zip: FROSTPROOF, FL 33843

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: VPD (X) Change () Addition
Name: HUTZELMAN, KAY
Address: 755 N. LK. REEDY BLVD.
City-St-Zip: FROSTPROOF, FL 33843

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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Name:
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Name:
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City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: STELLA C HEATH

RA

04/30/2004

Electronic Signature of Signing Officer or Director

_____ Date