2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N0000003234

FILED Apr 18, 2007 Secretary of State

Entity Name: SEMINOLE COUNTY/LAKE MARY REGIONAL CHAMBER OF COMMERCE. INC.

Current Principal Place of Business:		New Prince	New Principal Place of Business:	
100	ERA BLVD RY, FL 32746			
	lailing Addres	ss:	New Maili	ng Address:
725 PRIME	ERA BLVD			
100 LAKE MAF	RY, FL 32746			
FEI Number	: 59-3646781	FEI Number Applied For ()	FEI Number Not App	licable () Certificate of Status Desired ()
Name and	Address of C	Current Registered Agent:	Name and	Address of New Registered Agent:
100	ERA BLVD RY, FL 32746	US		
-, ,	1 (2)	1 2 0 1 1 1 1 1 1 1 1 1 1		
	named entity : e of Florida.	submits this statement for the	ourpose of changing	its registered office or registered agent, or both
n the State	e of Florida.		, , ,	its registered office or registered agent, or both
n the State	e of Florida.	submits this statement for the	, , ,	its registered office or registered agent, or both Date
in the State	e of Florida.	nic Signature of Registered Ag	ent	
n the State SIGNATUI OFFICER: Title: Name: Address:	e of Florida. RE: Electror S AND DIREC	nic Signature of Registered Ag TORS: Delete IE BLVD.	ent	Date
in the State SIGNATUI OFFICER Title: Name: Address: City-St-Zip: Title: Name: Address:	e of Florida. RE: Electror S AND DIREC P () PARKER, DIAN 725 PRIMERA LAKE MARY, F	nic Signature of Registered Ag TORS:) Delete BLVD. L 32746) Delete INIS N PARK POINT	ent ADDITION Title: Name: Address:	Date IS/CHANGES TO OFFICERS AND DIRECTO
in the State	e of Florida. RE: Electror S AND DIREC P () PARKER, DIAN 725 PRIMERA LAKE MARY, F DC () BOWMAN, DEN 940 WILLISTON LAKE MARY, F DTS () ANDERSON, E	nic Signature of Registered Ag TORS:) Delete IE BLVD. L 32746) Delete INIS N PARK POINT L 32746) Delete UGENE ARING CROSS CIRCLE	ent ADDITION Title: Name: Address: City-St-Zip: Title: Name: Address:	Date IS/CHANGES TO OFFICERS AND DIRECTO () Change () Addition D (X) Change () Addition BOWMAN, DENNIS 940 WILLISTON PARK POINT

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, 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: DIANE PARKER P 04/18/2007