## 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

SIGNATURE:

## FILED Apr 07, 2008 8:00 am Secretary of State

04-07-2008 90056 002 \*\*\*\*61 25

Daylime Phone #

DOCUMENT # N0000003234  1. Entity Name SEMINOLE COUNTY/LAKE MARY REGIONAL CHAMBER OF COMMERCE, INC.							04-07-2008 9	90036 002	01	.23
725 PRIMER 100 Lake Mary,	FL 32746		Mailing Address 725 PRIMERA BLVD 100 LAKE MARY, FL 327	46			 			
2. Principal Place of Business - No P.O. Box #  1055 AAA DRIVE			3. Mailing Address 1055 AAA DR		NA	] [[[]] [[] []				
Suite, Apt	, #, etc.		Suite, Apt. #, etc.			03282008	Chg-NP	CR2E037	(12/06)	
City & Sta	53 te		City & State			4. FEI Number			Ap	plied For
HEATH	HOW		HEATHRON			59-3646	<u> </u>			t Applicable
Zip  Schulo C  Country  Schulo C  6. Name and Address of Current R		32746 Se		untry <u>zminole</u> I				3.75 Add e Required ent		
PARKER,	DIANE ERA BLVD					OHN AS	HWORTH			
100					ļ		<u>.</u>	<u> </u>		
LAKE MARY, FL 32746					City	AAA DI	RIVE, Si		∑3 Zip Code	<u> </u>
8. The above	a named entity s	submits this statement for	the purpose of changing	its registere	Hef	THROW istered agent or both	in the State of Flo	FL pride lam fam	324	46
the obliga	tions of register	ed agent.	and purposes or entanging	no registori	oa omee or reg	idialec agoni, or out	i, in the state of the	moa. vani ian	illicai versi i, e	and accept
SIGNATURE	- SX-1	Showorth					4/2/	8		٠,
(		printed name of registered agent an	d title if applicable. (N	OTE: Registere	d Agent signature rec	quired when reinstating)		DATE		- u
				9. Election Campaign Financing Trust Fund Contribution.			\$5.00 May Be Added to Fees  Make check payable to Fiorida Department of State			
	Filing Fee Due by Ma									
10."	Due by Ma		Trust Fund	Contributi	ion.	Added to Fees ADDITIONS/CHA		ida Departm RS AND DIREC	ent of Sta	10
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TURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR