

# 2002 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
Feb 07, 2002 8:00 am  
Secretary of State

02-07-2002 90068 018 \*\*\*\*61.25

**DOCUMENT # N29687**

1. Entity Name

**ZEPHYRHILLS CHAMBER OF COMMERCE, INC.**

Principal Place of Business

Mailing Address

**38550 5TH AVE  
ZEPHYRHILLS FL 33540  
US**

**38550 5TH AVE  
ZEPHYRHILLS FL 33540  
US**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number **59-0668171**

Applied For  
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**MCDUFFIE, W C  
38550 5TH AVE  
ZEPHYRHILLS FL 33540**

Name

Street Address (P.O. Box Number is Not Acceptable)

City

**FL**

Zip Code

8. 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

*W. Cliff McDuffie*

**W. Cliff McDuffie**

**1-22-02**

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

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW: FEE IS \$61.25**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00 May Be  
Added to Fees**

**Make Check Payable to  
Department of State**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**PED  
FIRST, GREG  
38040 MARKET SQUARE DR  
ZEPHYRHILLS FL 33540** ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**PD** ☒ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**SD  
WATERS, R M  
5435 GALL BLVD  
ZEPHYRHILLS FL 33541** ☒ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**TD  
VAN, THOMAS M  
38039 5TH AVE  
ZEPHYRHILLS FL 33541** ☒ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**VD  
PENNINGTON, PATRICIA  
38112 15th AVENUE  
ZEPHYRHILLS, FL 33540** ☐ Change ☒ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**PD  
STERNER, JERRY L  
7050 GALL BOULEVARD  
ZEPHYRHILLS FL 33541** ☒ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**SD  
DUFFY, MARIE  
36836 SR 54 WEST  
ZEPHYRHILLS, FL 33541** ☐ Change ☒ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**TD  
BARNETT, DALE  
5908 7TH STREET  
ZEPHYRHILLS FL 33540** ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Change ☐ Addition

12. 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

**SIGNATURE:** *Greg First* **SIGNATURE REQUIRED** Greg First, President 800-683-8355 1-22-02

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (9/01)