

2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 711471

**FILED
Apr 18, 2016
Secretary of State
CC6954506149**

Entity Name: CHARLOTTE COUNTY CHAMBER OF COMMERCE, INC.

Current Principal Place of Business:

2702 TAMIAMI TRL
PORT CHARLOTTE, FL 33952-5129

Current Mailing Address:

2702 TAMIAMI TRL
PORT CHARLOTTE, FL 33952-5129 US

FEI Number: 59-1149738

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

MATHIS, JULIE C
2702 TAMIAMI TRL
PORT CHARLOTTE, FL 33952-5129 US

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

Officer/Director Detail :

Title MS
Name MATHIS, JULIE C
Address 2702 TAMIAMI TRL
City-State-Zip: PORT CHARLOTTE FL 33952

Title PRESIDENT, DIRECTOR
Name LUCAS, JASON
Address 17833 MURDOCK CIR.
SUITE B
City-State-Zip: PORT CHARLOTTE FL 33948

Title VP, DIRECTOR
Name DULL, DENISE
Address 128 W CHARLOTTE AVE
City-State-Zip: PUNTA GORDA FL 33950

Title PE, DIRECTOR
Name BURCH, ALYSON
Address 2331 TAMIAMI TRAIL
City-State-Zip: PUNTA GORDA FL 33950

Title TREASURER
Name JEFF, BROWN
Address 366 W OLYMPIA AVE
City-State-Zip: PUNTA GORDA FL 33950

Title PP, DIRECTOR
Name ATKINSON, WENDY
Address 45991 BERMONT RD.
City-State-Zip: PUNTA GORDA FL 33982-9653

I hereby 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 all other like empowered.

SIGNATURE: JULIE MATHIS

**EXECUTIVE DIRECTOR, 04/18/2016
SECRETARY**

Electronic Signature of Signing Officer/Director Detail

Date