## 2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

**DOCUMENT# 764599** 

Entity Name: KISSIMMEE/OSCEOLA COUNTY CHAMBER OF COMMERCE,

INC.

Apr 17, 2017 **Secretary of State** CC9438597371

**FILED** 

**Current Principal Place of Business:** 

1425 E VINE ST KISSIMMEE, FL 34744

**Current Mailing Address:** 

1425 E VINE ST

KISSIMMEE, FL 34744

FEI Number: 59-0319865 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

NEWSTREET, JOHN D 1425 E VINE ST KISSIMMEE, FL 34744 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: JOHN D NEWSTREET 04/17/2017

> Electronic Signature of Registered Agent Date

Officer/Director Detail:

Title **DIRECTOR** Title DIRECTOR

Name GENT, CHRIS Name SMOLEY, SHARON

Address 1701 WEST CARROLL STREET Address PO BOX 10,000

City-State-Zip: KISSIMMEE FL 34741 City-State-Zip: LAKE BUENA VISTA FL 32830

**DIRECTOR** Title **DIRECTOR** Title

FINKENBINDER, TIMOTHY Name THACKER, JO Name

Address 390 NORTH ORANGE AVENUE Address 100 CHURCH STREET 1400 City-State-Zip: KISSIMMEE FL 34741

City-State-Zip: ORLANDO FL 32801

Title REGISTERED AGENT NEWSTREET, JOHN Name Address 1425 E VINE STREET City-State-Zip: KISSIMMEE FL

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: JOHN NEWSTREET

Electronic Signature of Signing Officer/Director Detail

04/17/2017 **PRESIDENT** 

Date