

**2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N49804

**Entity Name:** GREATER SEBRING CHAMBER OF COMMERCE, INC.**Current Principal Place of Business:**227 US 27 NORTH  
SEBRING, FL 33870**Current Mailing Address:**227 US 27 NORTH  
SEBRING, FL 33870 US**FEI Number:** 59-0532480**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**BARBER, ELIZABETH M PRESIDENT/CEO  
227 US 27 NORTH  
SEBRING, FL 33870 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:** ELIZABETH M BARBER

01/19/2015

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title IMMEDIATE PAST CHAIR  
Name HANCOCK, JANE  
Address 227 US 27 NORTH  
City-State-Zip: SEBRING FL 33870

Title CHAIR  
Name ELWELL, DON  
Address 227 US 27 NORTH  
City-State-Zip: SEBRING FL 33870

Title CHAIR ELECT  
Name JOHNSON, DUSTY  
Address 227 US 27 NORTH  
City-State-Zip: SEBRING FL 33870

Title 1ST VICE CHAIR  
Name NAWROCKI, ZBIGNIEW  
Address 227 US 27 NORTH  
City-State-Zip: SEBRING FL 33870

Title TREASURER  
Name FOSTER, TODD  
Address 227 US 27 NORTH  
City-State-Zip: SEBRING FL 33870

Title DIRECTOR  
Name BULLOCK, ROBERT  
Address 227 US 27 NORTH  
City-State-Zip: SEBRING FL 33870

Title DIRECTOR  
Name WASHINGTON, ROMONA  
Address 227 US 27 NORTH  
City-State-Zip: SEBRING FL 33870

Title DIRECTOR  
Name CHAUNDY, THOMAS  
Address 227 US 27 NORTH  
City-State-Zip: SEBRING FL 33870

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*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:** ELIZABETH BARBER

PRESIDENT/CEO

01/19/2015

Electronic Signature of Signing Officer/Director Detail

Date

**Officer/Director Detail Continued :**

Title DIRECTOR  
Name HUGHES, ANDREW  
Address 227 US 27 NORTH  
City-State-Zip: SEBRING FL 33870

Title DIRECTOR  
Name BERNARD, JOSEPH  
Address 227 US 27 NORTH  
City-State-Zip: SEBRING FL 33870

Title PRESIDENT/CEO  
Name BARBER, ELIZABETH M  
Address 227 US 27 NORTH  
City-State-Zip: SEBRING FL 33870

Title DIRECTOR  
Name COSGRAVE, BRIAN  
Address 227 US 27 NORTH  
City-State-Zip: SEBRING FL 33870

Title DIRECTOR  
Name LEITZEL, THOMAS  
Address 227 US 27 NORTH  
City-State-Zip: SEBRING FL 33870

Title SECRETARY  
Name MILSAP, BRAD  
Address 227 US 27 NORTH  
City-State-Zip: SEBRING FL 33870

Title 2ND VICE CHAIR  
Name VACANT, OFFICE  
Address 227 US 27 NORTH  
City-State-Zip: SEBRING FL 33870

Title DIRECTOR  
Name HERNANDEZ, VANESSA  
Address 227 US 27 NORTH  
City-State-Zip: SEBRING FL 33870

Title DIRECTOR  
Name FORD, DAVID  
Address 227 US 27 NORTH  
City-State-Zip: SEBRING FL 33870

Title DIRECTOR  
Name SHOOP, JC  
Address 227 US 27 NORTH  
City-State-Zip: SEBRING FL 33870