

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 11, 2001 8:00 am
Secretary of State

04-11-2001 90004 015 ****61.25

DOCUMENT # 703450

1. Entity Name

ISLAMORADA CHAMBER OF COMMERCE, INC.

Principal Place of Business

82688 OVERSEAS HIGHWAY
P.O. BOX 915
ISLAMORADA FL 33036

Mailing Address

82688 OVERSEAS HIGHWAY
P.O. BOX 915
ISLAMORADA FL 33036

2. Principal Place of Business

83272 Overseas Hwy

Suite, Apt. #, etc.

3. Mailing Address

P.O. Box 915

Suite, Apt. #, etc.

City & State

Islamorada FL

City & State

Islamorada FL

Zip

33036

Country

USA

Zip

33036

Country

USA

4. FEI Number

59-1031258

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

**WHITNEY, NANCY
116 PORT SALVO DR
ISLAMORADA FL 33036**

7. Name and Address of New Registered Agent

Name

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

83272 Overseas Hwy

City

Islamorada

FL

Zip Code

33036

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

Nancy Whitney

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

TITLE PD ☐ Delete
NAME BAHN, CARLA L
STREET ADDRESS PO BOX 318
CITY-ST-ZIP ISLAMORADA FL 33036

TITLE TD ☐ Delete
NAME THOMSON, TOM
STREET ADDRESS P O BOX 1413 N/A
CITY-ST-ZIP ISLAMORADA FL 33036

TITLE SD ☐ Delete
NAME WHEELER, ALEXA
STREET ADDRESS 85960 OVERSEAS HWY
CITY-ST-ZIP ISLAMORADA FL 33036

TITLE VD ☐ Delete
NAME BAHN, CARLA
STREET ADDRESS P.O. BOX 318
CITY-ST-ZIP ISLAMORADA FL 33036

TITLE SD ☒ Delete
NAME RYAN, CHRISTEL
STREET ADDRESS 10 FLAMINGO HAMMOCK RD
CITY-ST-ZIP ISLAMORADA FL 33036

TITLE VD ☐ Delete
NAME TAYLOR, DENNIS
STREET ADDRESS 12640 OVERSEAS HWY
CITY-ST-ZIP MARATHON FL 33050

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

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

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

TITLE SD ☒ Change ☐ Addition
NAME Hodgetts, Stuart
STREET ADDRESS P O Box 469
CITY-ST-ZIP Islamorada FL 33036

TITLE VD ☒ Change ☐ Addition
NAME Padgett, Hunter
STREET ADDRESS P.O. Box 1000
CITY-ST-ZIP Islamorada, FL 33036

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

TITLE VD ☒ Change ☐ Addition
NAME Cohn, David
STREET ADDRESS P.O. Box 1099
CITY-ST-ZIP Tavernier, FL 33070

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:

Signature of David Cohn

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (10/00)