


2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Aug 19, 2005 8:00 am
Secretary of State

08-19-2005 90007 021 ****61.25

DOCUMENT # 704230
 1. Entity Name
GREATER PLANTATION CHAMBER OF COMMERCE, INC.



Principal Place of Business
 7401 NW 4TH ST
 PLANTATION, FL 33317

Mailing Address
 7401 NW 4TH ST
 PLANTATION, FL 33317

50062357



2. Principal Place of Business
 Suite, Apt. #, etc.

3. Mailing Address
 Suite, Apt. #, etc.

City & State

City & State

Zip Country Zip Country

08102005 Chg-NP CR2E037 (10/03)

4. FEI Number
59-0977809

Applied For
 Not Applicable

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

6. Name and Address of Current Registered Agent

SINIAWSKY, JEFFERY
 300 NW 82 AVE
 #505
 PLANTATION, FL 33324

7. Name and Address of New Registered Agent

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

Filing Fee is \$61.25
Due by September 7, 2005

9. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

Make check payable to Florida Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE COB
 NAME WOODARD, KARL Delete
 STREET ADDRESS 7401 NW 4 STREET
 CITY-ST-ZIP PLANTATION, FL 33317

TITLE Director
 NAME Woodard, Karl Change Addition
 STREET ADDRESS 7401 NW 4 St.
 CITY-ST-ZIP Plantation, FL 33317

TITLE STD
 NAME WILLIAMS, DOUGLAS Delete
 STREET ADDRESS 7401 NW 4TH ST.
 CITY-ST-ZIP PLANTATION, FL

TITLE COB
 NAME Peterson Shana Change Addition
 STREET ADDRESS 7401 NW 4 St.
 CITY-ST-ZIP Plantation, FL 33317

TITLE S
 NAME SIMMONS, BARBARA Delete
 STREET ADDRESS 7401 NW 4TH ST.
 CITY-ST-ZIP PLANTATION, FL 33317

TITLE Director
 NAME Capp, Sean Change Addition
 STREET ADDRESS 7401 NW 4 St.
 CITY-ST-ZIP Plantation, FL 33317

TITLE D
 NAME PETERSON, SHANA Delete
 STREET ADDRESS 7401 NW 4 STREET
 CITY-ST-ZIP PLANTATION, FL 33317

TITLE NAME STREET ADDRESS CITY-ST-ZIP Change Addition

TITLE D
 NAME LAYSTROM, BILL Delete
 STREET ADDRESS 1177 S.E. 3 AVE.
 CITY-ST-ZIP FT. LAUDERDALE, FL

TITLE NAME STREET ADDRESS CITY-ST-ZIP Change Addition

TITLE D
 NAME GONSHAK, EVAN Delete
 STREET ADDRESS 7401 N.W 4 STREET
 CITY-ST-ZIP PLANTATION, FL 33317

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: Shana D. Peterson Date _____ Daytime Phone # _____
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR