2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 706373

FILED Mar 03, 2009 Secretary of State

Entity Name: GREATER SEMINOLE AREA CHAMBER OF COMMERCE, INC.

Current Principal Place of Business: New Principal Place of Business:

8400 113 ST N

SEMINOLE, FL 33772 US

Current Mailing Address: New Mailing Address:

PO BOX 3337 8400 113 ST N

SEMINOLE, FL 337753337 US SEMINOLE, FL 33772 US

FEI Number: 59-1052175 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

JOHNSON, JAMES G 8400 113TH STREET NO SEMINOLE, FL 33772 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

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: S () Delete Title: S (X) Change () Addition

 Name:
 MCMULLEN, CLAUDE
 Name:
 BERARD, DAN

 Address:
 8982 SEMINOLE BLVD
 Address:
 10833 SEMINOLE BLVD

 City-St-Zip:
 SEMINOLE, FL 33772
 City-St-Zip:
 SEMINOLE, FL 33778

Title: ED () Delete Title: () Change () Addition

 Name:
 JOHNSON, JÄMES G
 Name:

 Address:
 8400 113TH ST N
 Address:

 City-St-Zip:
 SEMINOLE, FL 33772
 City-St-Zip:

Title: P () Delete Title: PP (X) Change () Addition

 Name:
 KINSEY, HAROLD
 Name:
 KINSEY, HAROLD

 Address:
 11494 88TH AVENUE
 Address:
 11494 88TH AVENUE

 City-St-Zip:
 SEMINOLE, FL 33772
 City-St-Zip:
 SEMINOLE, FL 33772

Title: T () Delete Title: () Change () Addition

 Name:
 OLLIVER, JAMES DR
 Name:

 Address:
 9200 113TH ST N
 Address:

 City-St-Zip:
 SEMINOLE, FL 33772
 City-St-Zip:

 Name:
 ZIEGLER, PAUL
 Name:
 ZIEGLER, PAUL

 Address:
 5858 CENTRAL AVENUE
 Address:
 5858 CENTRAL AVENUE

 City-St-Zip:
 SAINT PETERSBURG, FL 33710
 City-St-Zip:
 SAINT PETERSBURG, FL 33710

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: JAMES G. JOHNSON ED 03/03/2009