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Jun 18 1998 8:00am  
Secretary of State

NONPROFIT  
CORPORATION  
ANNUAL REPORT  
1998



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # 707495 (8)  
1. Corporation Name  
GREATER LARGO CHAMBER OF COMMERCE INC

Principal Place of Business

Mailing Address

395 1ST AV S W  
LARGO FL 33770  
US

395 1ST AV S W  
LARGO FL 33770  
US



2. Principal Place of Business

2a. Mailing Address

21 395 1st Ave SW

26 395 1st Ave SW

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22 City & State

27 City & State

23 Largo

28 Largo

Zip

Country

Zip

Country

24 33770

25 USA

29 33770

30 USA

9. Name and Address of Current Registered Agent

3. Date Incorporated or Qualified

06/29/1964

4. FEI Number

59-0703345

Applied For

Not Applicable

5. Certificate of Status Desired

☐ \$8.75 Additional  
Fee Required

6. Election Campaign Financing  
Trust Fund Contribution

☐ \$5.00 May Be  
Added to Fees

7. Is this nonprofit corporation a homeowners association?

☐ Yes ☒ No

8. This corporation owes or has paid the current year Intangible  
Personal Property Tax due June 30.

☐ Yes ☒ No

10. Name and Address of New Registered Agent

MALTA, LARRY  
395 1ST AVE SW  
LARGO FL 33770

81 Name

Marc Mansfield

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

395 1st Ave SW

83

84 City

Largo

FL

85 Zip Code  
33770

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE Marc Mansfield, President

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE 4/29/98

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE P  
NAME COLLINS, JEFFREY A  
STREET ADDRESS 2025 INDIAN ROCKS ROAD  
CITY-ST-ZIP LARGO FL

☒ DELETE

1.1 TITLE  
1.2 NAME  
1.3 STREET ADDRESS  
1.4 CITY-ST-ZIP

D  
Ramesh Parekh

2700 East Bay Dr #107

Largo, FL 33770

☐ Change ☒ Addition

TITLE PD  
NAME SCHUTTE, LANA  
STREET ADDRESS 601 INDIAN ROCKS RD  
CITY-ST-ZIP BELLEAIR FL

☒ DELETE

2.1 TITLE  
2.2 NAME  
2.3 STREET ADDRESS  
2.4 CITY-ST-ZIP

☐ Change ☐ Addition

TITLE VD  
NAME MORGAN, DON D  
STREET ADDRESS 320 N INDIAN ROCKS RD  
CITY-ST-ZIP BELLEAIR BLUFFS FL

☐ DELETE

3.1 TITLE  
3.2 NAME  
3.3 STREET ADDRESS  
3.4 CITY-ST-ZIP

D  
Dr. Don Morgan

320 N Indian Rocks Rd.

Belleair Bluffs, FL 33770

☒ Change ☐ Addition

TITLE VD  
NAME BOLLENBACK, MICHAEL  
STREET ADDRESS 1006 PINELLAS ST  
CITY-ST-ZIP CLEARWATER FL

☐ DELETE

4.1 TITLE  
4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY-ST-ZIP

D  
Michael Bollenback

1006 Pinellas St

Clearwater, FL 33756

☒ Change ☐ Addition

TITLE VD  
NAME MCMANUS, MARY  
STREET ADDRESS 79 OVERBROOK DRIVE  
CITY-ST-ZIP LARGO FL

☒ DELETE

5.1 TITLE  
5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY-ST-ZIP

☐ Change ☐ Addition

TITLE TD  
NAME SYMANSKI, BOB  
STREET ADDRESS 1901 SEMINOLE BLVD STE 115  
CITY-ST-ZIP LARGO FL

☒ DELETE

6.1 TITLE  
6.2 NAME  
6.3 STREET ADDRESS  
6.4 CITY-ST-ZIP

☐ Change ☐ Addition

14. 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

Marc Mansfield

CR2E037 (1097)

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CORPORATION  
ANNUAL REPORT  
**1998**



FLORIDA DEPARTMENT OF STATE  
**Sandra B. Mortham**  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # **707495** (8)  
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US**

**395 1ST AV S W  
LARGO FL 33770  
US**

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Not Applicable

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Zip

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395 1ST AVE SW  
LARGO FL 33770**

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**Marc Mansfield**

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**33770**

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SIGNATURE **Marc Mansfield, President**

*Marc Mansfield*

**4/29/98**

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE **P** ☒ DELETE

NAME **COLLINS, JEFFREY A**  
STREET ADDRESS **2025 INDIAN ROCKS ROAD**  
CITY-ST-ZIP **LARGO FL**

TITLE **PO** ☒ DELETE

NAME **SCHUTTE, LANA**  
STREET ADDRESS **601 INDIAN ROCKS RD**  
CITY-ST-ZIP **BELLEAIR FL**

TITLE **VD** ☐ DELETE

NAME **MORGAN, DON D**  
STREET ADDRESS **320 N INDIAN ROCKS RD**  
CITY-ST-ZIP **BELLEAIR BLUFFS FL**

TITLE **VD** ☐ DELETE

NAME **BOLLENBACK, MICHAEL**  
STREET ADDRESS **1006 PINELLAS ST**  
CITY-ST-ZIP **CLEARWATER FL**

TITLE **VD** ☒ DELETE

NAME **MCMAHUS, MARY**  
STREET ADDRESS **70 OVERBROOK DRIVE**  
CITY-ST-ZIP **LARGO FL**

TITLE **TD** ☒ DELETE

NAME **SYMANSKI, BOB**  
STREET ADDRESS **1901 SEMINOLE BLVD STE 115**  
CITY-ST-ZIP **LARGO FL**

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☒ Addition

1.2 NAME **D**  
1.3 STREET ADDRESS **Ramesh Parekh**  
1.4 CITY-ST-ZIP **2700 East Bay Dr #107  
Largo, FL 33770**

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME  
2.3 STREET ADDRESS  
2.4 CITY-ST-ZIP

3.1 TITLE ☒ Change ☐ Addition

3.2 NAME **Dr. Don Morgan**  
3.3 STREET ADDRESS **320 N Indian Rocks Rd.**  
3.4 CITY-ST-ZIP **Belleair Bluffs, FL 33770**

4.1 TITLE ☒ Change ☐ Addition

4.2 NAME **D**  
4.3 STREET ADDRESS **Michael Bollenback**  
4.4 CITY-ST-ZIP **1006 Pinellas St  
Clearwater, FL 33756**

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME  
6.3 STREET ADDRESS  
6.4 CITY-ST-ZIP

14. 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: **Marc Mansfield, President**

*Marc Mansfield*

CR2E037 (10/97)