

**FILED**  
**Apr 21, 1999 8:00 am**  
**Secretary of State**

04-21-1999 90188 039 \*\*\*\*61.25

|                                                 |                                                                                   |                                                                                                                               |
|-------------------------------------------------|-----------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------|
| <b>NONPROFIT CORPORATION ANNUAL REPORT 1999</b> |  | <b>FLORIDA DEPARTMENT OF STATE</b><br><b>Katherine Harris</b><br><b>Secretary of State</b><br><b>DIVISION OF CORPORATIONS</b> |
|-------------------------------------------------|-----------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------|

**DOCUMENT # 709023**

1. Corporation Name

**THE CHAMBER: DAYTONA BEACH & HALIFAX AREA**

Principal Place of Business

 133 E ORANGE AVE.  
 P.O. BOX 2475  
 DAYTONA BEACH FL 32114-4406

Mailing Address

 126 E ORANGE AVE.  
 P.O. BOX 2475  
 DAYTONA BEACH FL 32114-4406


|                                                 |                        |                                                                                                             |
|-------------------------------------------------|------------------------|-------------------------------------------------------------------------------------------------------------|
| 2. Principal Place of Business                  | 2a. Mailing Address    | 3. Date Incorporated or Qualified                                                                           |
| 21 Suite, Apt. #, etc.                          | 26 Suite, Apt. #, etc. | 05/26/1965                                                                                                  |
| 22 City & State                                 | 27 City & State        | 4. FEI Number                                                                                               |
| 23 Zip                                          | 28 Zip                 | 59-0215990                                                                                                  |
| 24 Country                                      | 29 Country             | Applied For                                                                                                 |
|                                                 | 30                     | Not Applicable                                                                                              |
| 9. Name and Address of Current Registered Agent |                        | 5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required                    |
| 10. Name and Address of New Registered Agent    |                        | 6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees |

 MIRABAL, GEORGE  
 126 E ORANGE AVE.  
 DAYTONA BEACH FL 32114

81 Name

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

83

84 City

FL

85 Zip Code

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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

|                            |                                              |                                                       |                                                                              |
|----------------------------|----------------------------------------------|-------------------------------------------------------|------------------------------------------------------------------------------|
| 12. OFFICERS AND DIRECTORS |                                              | 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 |                                                                              |
| TITLE                      | PD <input type="checkbox"/> DELETE           | 1.1 TITLE                                             | <input type="checkbox"/> Change <input type="checkbox"/> Addition            |
| NAME                       | COLEMAN, BOB                                 | 1.2 NAME                                              |                                                                              |
| STREET ADDRESS             | 126 E ORANGE AVE                             | 1.3 STREET ADDRESS                                    |                                                                              |
| CITY-ST-ZIP                | DAYTONA BEACH FL                             | 1.4 CITY-ST-ZIP                                       |                                                                              |
| TITLE                      | D <input checked="" type="checkbox"/> DELETE | 2.1 TITLE                                             | <input type="checkbox"/> Change <input type="checkbox"/> Addition            |
| NAME                       | USINA, GARY                                  | 2.2 NAME                                              |                                                                              |
| STREET ADDRESS             | 126 E. ORANGE AVE                            | 2.3 STREET ADDRESS                                    |                                                                              |
| CITY-ST-ZIP                | DAYTONA BCHC FL                              | 2.4 CITY-ST-ZIP                                       |                                                                              |
| TITLE                      | TD <input type="checkbox"/> DELETE           | 3.1 TITLE                                             | <input type="checkbox"/> Change <input type="checkbox"/> Addition            |
| NAME                       | FORNARI, LARRY                               | 3.2 NAME                                              |                                                                              |
| STREET ADDRESS             | 126 E ORANGE AVE                             | 3.3 STREET ADDRESS                                    |                                                                              |
| CITY-ST-ZIP                | DAYTONA BEACH FL                             | 3.4 CITY-ST-ZIP                                       |                                                                              |
| TITLE                      | <input type="checkbox"/> DELETE              | 4.1 TITLE                                             | <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition |
| NAME                       |                                              | 4.2 NAME                                              | GLENN RITCHIE                                                                |
| STREET ADDRESS             |                                              | 4.3 STREET ADDRESS                                    | 126 EAST ORANGE AVE                                                          |
| CITY-ST-ZIP                |                                              | 4.4 CITY-ST-ZIP                                       | DAYTONA BEACH FL 32114                                                       |
| TITLE                      | <input type="checkbox"/> DELETE              | 5.1 TITLE                                             | <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition |
| NAME                       |                                              | 5.2 NAME                                              | GEORGE MIRABAL                                                               |
| STREET ADDRESS             |                                              | 5.3 STREET ADDRESS                                    | 126 EAST ORANGE AVE                                                          |
| CITY-ST-ZIP                |                                              | 5.4 CITY-ST-ZIP                                       | DAYTONA BEACH FL 32114                                                       |
| TITLE                      | <input type="checkbox"/> DELETE              | 6.1 TITLE                                             | <input type="checkbox"/> Change <input type="checkbox"/> Addition            |
| NAME                       |                                              | 6.2 NAME                                              |                                                                              |
| STREET ADDRESS             |                                              | 6.3 STREET ADDRESS                                    |                                                                              |
| CITY-ST-ZIP                |                                              | 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, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/12/99

Date

Daytime Phone #

CR2E037 (1/1/98)