2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 11, 2005
Secretary of State

DOCUMENT# 711768

Entity Name: LAKELAND AREA CHAMBER OF COMMERCE, INC.

Current Principal Place of Business:

35 LAKE MORTON DRIVE
LAKELAND, FL 33801

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 3607
LAKELAND, FL 338023607

New Mailing Address:

FEI Number: 59-0324437 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

MUNSON, KATHLEEN L
35 LAKE MORTON DRIVE
LAKELAND, FL 33801 US

Name and Address of New Registered Agent:

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:

Title:	D	( ) Delete
Name:	CAMPBELL, TIMOTHY F	
Address:	500 S. FLORIDA AVE, STE. 800	
City-St-Zip:	LAKELAND, FL 338015271 US	
Title:	D	( ) Delete
Name:	CLOYD, BILL	
Address:	205 E ORANGE ST	
City-St-Zip:	LAKELAND, FL 33801 US	
Title:	D	( ) Delete
Name:	HOLLIS, CLAYTON	
Address:	3300 AIRPORT ROAD	
City-St-Zip:	LAKELAND, FL 33811 US	
Title:	D	( ) Delete
Name:	ATTAWAY, JOHN III	
Address:	3300 AIRPORT ROAD	
City-St-Zip:	LAKELAND, FL 33811 US	
Title:	PSD	( ) Delete
Name:	MUNSON, KATHLEEN L	
Address:	35 LAKE MORTON DRIVE	
City-St-Zip:	LAKELAND, FL 33801 US	
Title:	D	( ) Delete
Name:	ALBRITTON, KEITH	
Address:	1401 S. FLORIDA AVENUE	
City-St-Zip:	LAKELAND, FL 33803	

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title:	V	(X) Change ( ) Addition
Name:	CAMPBELL, TIMOTHY F	
Address:	500 S. FLORIDA AVE, STE. 800	
City-St-Zip:	LAKELAND, FL 338015271 US	
Title:	C	(X) Change ( ) Addition
Name:	LARRY, DURRENCE	
Address:	999 AVENUE H NE	
City-St-Zip:	WINTER HAVEN, FL 33881 US	
Title:	D	(X) Change ( ) Addition
Name:	MAUREEN, SHAW	
Address:	1125 LAKELAND HILLS BLVD.	
City-St-Zip:	LAKELAND, FL 33805 US	
Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:	D	(X) Change ( ) Addition
Name:	FORD, HEACOCK	
Address:	100 E. MAIN ST.	
City-St-Zip:	LAKELAND, FL 33801	

I hereby certify that the information supplied with this filing does not qualify for the 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 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: KATHLEEN L. MUNSON PSD 04/11/2005

Electronic Signature of Signing Officer or Director — Date