

# FILE NOW: FILING FEE IS \$61.25

NONPROFIT  
CORPORATION  
ANNUAL REPORT  
1996



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

DOCUMENT # 711855 (7)

1. Corporation Name

THE GREATER CORAL SPRINGS CHAMBER OF COMMERCE, INC.

900001753579  
-03/22/96--01003--021  
\*\*\*61.25



Principal Place of Business

Mailing Address

9801 WEST SAMPLE ROAD  
CORAL SPRINGS FL 33065

9801 WEST SAMPLE ROAD  
CORAL SPRINGS FL 33065

3. Date Incorporated or Qualified  
11/30/1966

3a. Date of Last Report  
04/19/1995

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip

Country

28 Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

LYDEN, VICKY  
9801 W. SAMPLE RD.  
CORAL SPRINGS FL 33065

81 Name

SHARON RAHN

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

9801 W. SAMPLE RD.

83

84 City

Coral Springs FL

85 Zip Code

33065

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

Sharon L. Rahn

President

1/17/96

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          | CD                  | <input checked="" type="checkbox"/> DELETE |
| NAME           | NEIMARK, CORT       |  |
| STREET ADDRESS | 9801 W SAMPLE ROAD  |  |
| CITY-ST-ZIP    | CORAL SPRINGS FL    |  |
| TITLE          | DS                  | <input checked="" type="checkbox"/> DELETE |
| NAME           | TILTON, JAMES       |  |
| STREET ADDRESS | 9801 W SAMPLE ROAD  |  |
| CITY-ST-ZIP    | CORAL SPRINGS FL    |  |
| TITLE          | DT                  | <input checked="" type="checkbox"/> DELETE |
| NAME           | KENDALL, RICHARD    |  |
| STREET ADDRESS | 9801 W. SAMPLE RD.  |  |
| CITY-ST-ZIP    | CORAL SPRINGS FL    |  |
| TITLE          | DT                  | <input checked="" type="checkbox"/> DELETE |
| NAME           | GRIFFIN, WILLIAM I  |  |
| STREET ADDRESS | 9801 W. SAMPLE ROAD |  |
| CITY-ST-ZIP    | CORAL SPRINGS FL    |  |
| TITLE          |                     | <input type="checkbox"/> DELETE            |
| NAME           |                     |  |
| STREET ADDRESS |                     |  |
| CITY-ST-ZIP    |                     |  |
| TITLE          |                     | <input type="checkbox"/> DELETE            |
| NAME           |                     |  |
| STREET ADDRESS |                     |  |
| CITY-ST-ZIP    |                     |  |

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

|                    |                         |  |
|--------------------|-------------------------|--|
| 1.1 TITLE          | CD                      | <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition |
| 1.2 NAME           | BROWSTEIN, ARNOLD       |  |
| 1.3 STREET ADDRESS | 9801 W. SAMPLE ROAD     |  |
| 1.4 CITY-ST-ZIP    | CORAL SPRINGS, FL.      |  |
| 2.1 TITLE          | DS                      | <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition |
| 2.2 NAME           | Caplan, Michael         |  |
| 2.3 STREET ADDRESS | 9801 W. SAMPLE ROAD     |  |
| 2.4 CITY-ST-ZIP    | Coral Springs, FL.      |  |
| 3.1 TITLE          | DT                      | <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition |
| 3.2 NAME           | Dolan, Pamela           |  |
| 3.3 STREET ADDRESS | 9801 W. SAMPLE ROAD     |  |
| 3.4 CITY-ST-ZIP    | Coral Springs, FL.      |  |
| 4.1 TITLE          | GRIFFIN, WILLIAM I      | <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition |
| 4.2 NAME           |                         |  |
| 4.3 STREET ADDRESS | 9801 W. SAMPLE ROAD     |  |
| 4.4 CITY-ST-ZIP    | Coral Springs, FL       |  |
| 5.1 TITLE          | D                       | <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition |
| 5.2 NAME           | STEVENSON, Ric          |  |
| 5.3 STREET ADDRESS | 9801 W. SAMPLE ROAD     |  |
| 5.4 CITY-ST-ZIP    | CORAL SPRINGS, FL.      |  |
| 6.1 TITLE          | Sharon L. Rahn          | <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition |
| 6.2 NAME           |                         |  |
| 6.3 STREET ADDRESS | 9801 W. Sample Rd       |  |
| 6.4 CITY-ST-ZIP    | Coral Springs, FL 33065 |  |

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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:

Sharon L. Rahn, President

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/17/96

Date

954-752-4242

Daytime Phone #

CR2E037 (12/95)