


FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE  
Katherine Harris  
Secretary of State  
DIVISION OF CORPORATIONS

99 MAR -1 AM 9:14  
STATE TALLAHASSEE, FLORIDA

DOCUMENT # 717758  
1. Corporation Name  
**GREATER SANFORD CHAMBER OF COMMERCE, INC.**

Principal Place of Business: 400 E. FIRST STREET, SANFORD FL 32771  
Mailing Address: 400 E. FIRST STREET, SANFORD FL 32771



21	2. Principal Place of Business	2a. Mailing Address	3. Date Incorporated or Qualified	4. FEI Number	Applied For
	Suite, Apt. #, etc.	Suite, Apt. #, etc.	11/02/1945	59-0440968	Not Applicable
22	City & State	City & State	5. Certificate of Status Desired		\$8.75 Additional Fee Required
23	Zip	Zip			\$5.00 May Be Added to Fees
24	Country	Country	6. Election Campaign Financing Trust Fund Contribution		
25		29			
26		30			

9. Name and Address of Current Registered Agent	10. Name and Address of New Registered Agent
ROSE, RONALD 400 E. FIRST STREET SANFORD FL 32771	81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 83 City 84 City

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits its 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: *Ronald E. Rose* **RONALD E. ROSE, EXEC. DIRECTOR 2-5-99**

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	P SILLS, DOUG	11 TITLE	P Stairs, Helen
NAME		12 NAME	
STREET ADDRESS	1401 SEMINOLE BLVD.	13 STREET ADDRESS	101 W First St
CITY-ST-ZIP	SANFORD FL 32771	14 CITY-ST-ZIP	Sanford FL 32771
TITLE	VP	21 TITLE	VP
NAME	STAIRS, HELEN	22 NAME	Johnson, Linda
STREET ADDRESS	101 W. FIRST ST.	23 STREET ADDRESS	3675 S Orlando Dr
CITY-ST-ZIP	SANFORD FL 32771	24 CITY-ST-ZIP	Sanford FL 32773
TITLE	TD	31 TITLE	TD
NAME	GOODRICH, SARAH	32 NAME	Goodrich, Sarah J
STREET ADDRESS	SEMINOLE TWN CNTR, 1-4 EXIT 50/R 46	33 STREET ADDRESS	200 Town Center Cr
CITY-ST-ZIP	SANFORD NC 32771	34 CITY-ST-ZIP	Sanford FL 32771
TITLE		4.1 TITLE	Director
NAME		4.2 NAME	Bernie Fitzgerald
STREET ADDRESS		4.3 STREET ADDRESS	201 E. 1st Street
CITY-ST-ZIP		4.4 CITY-ST-ZIP	Sanford, FL 32771
TITLE		5.1 TITLE	Director
NAME		5.2 NAME	Rev Bruce Scott
STREET ADDRESS		5.3 STREET ADDRESS	301 S. Oak Ave
CITY-ST-ZIP		5.4 CITY-ST-ZIP	Sanford, FL 32771
TITLE		6.1 TITLE	Director
NAME		6.2 NAME	Richard Swann
STREET ADDRESS		6.3 STREET ADDRESS	312 W 1st Street
CITY-ST-ZIP		6.4 CITY-ST-ZIP	Sanford, FL 32771

Client Copy

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: *Ronald E. Rose* **2-5-99 (407) 321-6639**

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