

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 720392

FILED
Apr 23, 2009
Secretary of State

Entity Name: THE FORT MEADE CHAMBER OF COMMERCE, INC.

Current Principal Place of Business:

214 WEST BROADWAY, SUITE B
P.O. BOX 91
FORT MEADE, FL 33841

New Principal Place of Business:

214 WEST BROADWAY, SUITE B
FORT MEADE, FL 33841

Current Mailing Address:

214 WEST BROADWAY, SUITE B
P.O. BOX 91
FORT MEADE, FL 33841

New Mailing Address:

214 WEST BROADWAY, SUITE B
FORT MEADE, FL 33841

FEI Number: 59-1801080

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CINO, REGINA
804 NE 7TH ST
FORT MEADE, FL 33841 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: MCBRIDE, PATSY
Address: 403 E BROADWAY
City-St-Zip: FT. MEADE, FL

Title: P () Delete
Name: ELLIOTT, BOB
Address: P.O. BOX 60
City-St-Zip: FORT MEADE, FL 33841

Title: T () Delete
Name: GRAVES, BERVERLY
Address: 16 SOUTH SEMINOLE
City-St-Zip: FORT MEADE, FL 33841

Title: D () Delete
Name: GUENTHER, DENNIS
Address: 610 NASHUA AVENUE
City-St-Zip: FT. MEADE, FL 33841

Title: D () Delete
Name: STOUGHTON, HOWIE
Address: 5880 MANTEY ROAD
City-St-Zip: FT. MEADE, FL 33841

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: HODGE, WILLIAM
Address: P.O. BOX 933
City-St-Zip: FT. MEADE, FL 33841

Title: VP (X) Change () Addition
Name: MCLEAN, MARC
Address: 306 E. BROADWAY
City-St-Zip: FORT MEADE, FL 33841

Title: T (X) Change () Addition
Name: WRIGHT, JANET
Address: 300 S.WASHINGTON
City-St-Zip: FORT MEADE, FL 33841

Title: O (X) Change () Addition
Name: BRYANT, WALTER
Address: 173 PINE AVE.
City-St-Zip: FT. MEADE, FL 33841

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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: WILLIAM HODGE

P

04/23/2009

Electronic Signature of Signing Officer or Director

Date