

FILE NOW: FILING FEE AFTER MAY 1 IS \$155.00

CORPORATION  
ANNUAL REPORT  
1995



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

APPROVED  
AND  
FILED

95 MAY -1 AM 8:37

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DOCUMENT # 720610 (5)

1. Corporation Name

LAKE WALES AREA CHAMBER OF COMMERCE, INC

Principal Place of Business

Mailing Address

340 WEST CENTRAL AVE.  
P. O. BOX 191  
LAKE WALES FL 33859-7191

340 WEST CENTRAL AVE.  
P. O. BOX 191  
LAKE WALES FL 33859-7191

DO NOT WRITE IN THIS SPACE

3. Date incorporated or Qualified

03/21/1971

3a. Date of Last Report

04/27/1994

4. FEI Number

59-0324245

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional  
Fee Required

6. Election Campaign Financing  
Trust Fund Contribution

☐

\$5.00 May Be  
Added to Fees

7. Nonprofit with IRS 501(c)(3)  
Tax Exempt Status

☐

\$68.75 Supplemental  
Fee Not Required

8. This corporation has liability for intangible tax under S. 199.032,  
Florida Statutes

☒ Yes ☐ No

2. Principal Place of Business

2a. Mailing Address

21 Suits, Apt. #, etc.

26 Suits, Apt. #, etc.

23 City & State

27 City & State

24 Zip

25 Country

28 Zip

29 Country

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

ADEY, LINDA P  
340 WEST CENTRAL AVE.  
LAKE WALES FL 33859-7191

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 607.0502 and 607.1505, 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 607.0505, Florida Statutes.

SIGNATURE

*Linda P. Adey*

4/27/95

12. OFFICERS AND DIRECTORS

13. ADDITIONS CHANGES TO OFFICERS AND DIRECTORS IN 12

|                |                       |
|----------------|-----------------------|
| TITLE          | P                     |
| NAME           | INGEY, ROGER          |
| STREET ADDRESS | 340 WEST CENTRAL AVE. |
| CITY, ST, ZIP  | LAKE WALES FL         |
| TITLE          | VD                    |
| NAME           | FRIEDLANDER, EDWIN    |
| STREET ADDRESS | 340 WEST CENTRAL AVE. |
| CITY, ST, ZIP  | LAKE WALES FL         |
| TITLE          | D                     |
| NAME           | WEBB, JOE             |
| STREET ADDRESS | 340 WEST CENTRAL AVE. |
| CITY, ST, ZIP  | LAKE WALES FL         |
| TITLE          | DV                    |
| NAME           | SALUD, VIOLETA        |
| STREET ADDRESS | 340 WEST CENTRAL AVE. |
| CITY, ST, ZIP  | LAKE WALES FL         |
| TITLE          | DV                    |
| NAME           | SHEPHERD, JERRY       |
| STREET ADDRESS | 340 WEST CENTRAL AVE. |
| CITY, ST, ZIP  | LAKE WALES FL         |
| TITLE          | DT                    |
| NAME           | GORDON, ROBERT        |
| STREET ADDRESS | 340 WEST CENTRAL AVE. |
| CITY, ST, ZIP  | LAKE WALES FL         |

|                    |                     |
|--------------------|---------------------|
| 1. TITLE           | PD                  |
| 1. NAME            | ROBERT A. GORDON JR |
| 1.3 STREET ADDRESS | 222 HWY 60 E        |
| 1.4 CITY, ST, ZIP  | LAKE WALES FL 33853 |
| 2. TITLE           |                     |
| 2. NAME            |                     |
| 2.3 STREET ADDRESS |                     |
| 2.4 CITY, ST, ZIP  |                     |
| 3. TITLE           | VD                  |
| 3. NAME            | MARILETA SENN       |
| 3.3 STREET ADDRESS | 120 EAST STUART AVE |
| 3.4 CITY, ST, ZIP  | LAKE WALES FL 33853 |
| 4. TITLE           | VD                  |
| 4. NAME            | JIM WEAVER          |
| 4.3 STREET ADDRESS | 240 EAST PARK AVE   |
| 4.4 CITY, ST, ZIP  | LAKE WALES FL 33853 |
| 5. TITLE           | JD                  |
| 5. NAME            | JERRY STEPHARD      |
| 5.3 STREET ADDRESS | 1001 BURNS AVE      |
| 5.4 CITY, ST, ZIP  | LAKE WALES FL 33853 |
| 6. TITLE           | D                   |
| 6. NAME            | VIOLETA SALUD       |
| 6.3 STREET ADDRESS | 1 WEST CENTRAL AVE  |
| 6.4 CITY, ST, ZIP  | LAKE WALES FL 33853 |

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 110.07(2)(g), 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 the 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 affidavit.

SIGNATURE:

*Robert A. Gordon Jr.*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/27/95

676-7631

720610

Allan Brooks  
250 E. Park Ave.  
Lake Wales, Fl. 33853

Greg Hall  
5301 Hwy. 27 South  
Lake Wales, Fl. 33853

Lewis Hartley  
U.S. Hwy. 27 South  
Lake Wales, FL. 33853

Grant Houston  
151 East Central Avenue  
Lake Wales, Fl. 33853

Charlie Polk  
318 Scenic Hwy. South  
Lake Wales, Fl. 33853

Steve Schade  
1875 U.S. Hwy. 27 North  
Lake Wales, Fl. 33853

Don Sims  
650 U.S. Hwy. 27 North  
Lake Wales, Fl. 33853