2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 723574

FILED Jul 11, 2007 Secretary of State

Entity Name: THE ST. CLOUD GREATER OSCEOLA CHAMBER OF COMMERCE, INCORPORATED

Sufferit F	rincipal Place of Business:	New Principal Place of Business:
	/ YORK AVENUE D, FL 34769	
Current N	lailing Address:	New Mailing Address:
	/ YORK AVENUE D, FL 34769	
n accordan	: 59-0432372 FEI Number Applied For ce with s. 607.193(2)(b), F.S., the corporation I Address of Current Registered Age	n did not receive the prior notice.
	VID / YORK AVE D, FL 34769 US	
	named entity submits this statement fo e of Florida.	or the purpose of changing its registered office or registered agent, or both,
SIGNATUI	RE:	
	Electronic Signature of Register	ed Agent Date
OFFICER	S AND DIRECTORS:	ADDITIONS/CHANGES TO OFFICERS AND DIRECTOR
Fitle: Name: Address: Dity-St-Zip:	D () Delete DORSEY, THOMAS 1221 12TH STREET SAINT CLOUD, FL 34769	Title: () Change () Addition Name: Address: City-St-Zip:
Γitle: Name:	D () Delete SILVA, JOANNE PO BOX 3193 ORLANDO, FL 32802	Title: () Change () Addition Name: Address:
\ddress: City-St-Zip:		City-St-Zip:
City-St-Zip: Title: Jame: Address:	P () Delete LANE, DAVID 1200 NEW YORK AVENUE SAINT CLOUD, FL 34769	Title: () Change () Addition Name: Address: City-St-Zip:
City-St-Zip: Title: Jame: Address: City-St-Zip: Title: Jame: Address:	LANE, DAVID 1200 NEW YORK AVENUE	Title: () Change () Addition Name: Address:
City-St-Zip: itle: lame: ddress: City-St-Zip: itle: lame: ddress:	LANE, DAVID 1200 NEW YORK AVENUE SAINT CLOUD, FL 34769 D () Delete BENCA, CONNIE 1099 SHADY LANE	Title: () Change () Addition Name: Address: City-St-Zip: Title: () Change () Addition Name: Address:

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: DAVID C. LANE P 07/11/2007