2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT#725108

FILED Jan 07, 2009 Secretary of State

Certificate of Status Desired ()

Entity Name: GREATER HOMESTEAD - FLORIDA CITY CHAMBER OF COMMERCE, INC.

Current Principal Place of Business: New Principal Place of Business:

43 N. KROME AVE. 212 NW 1ST AVENUE

2ND FLOOR HOMESTEAD, FL 33030 US

HOMESTEAD, FL 33030 US

FEI Number: 59-0652495

Current Mailing Address: New Mailing Address:

43 N. KROME AVE P O BOX 901544

FEI Number Applied For ()

2ND FLOOR HOMESTEAD, FL 33090 US

HOMESTEAD, FL 33030 US

FEI Number Not Applicable ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

FINLAN, MARY A
43 N KROME AVENUE
5 FINLAN, MARY A
212 NW 1ST AVE

HOMESTEAD, FL 33030 US HOMESTEAD, FL 33030 US

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: MARY A. FINLAN 01/07/2009

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

itle: C () Delete Title: D (X) Change () Addition

 Name:
 OLESON, KATY
 Name:
 OLESON, KATY

 Address:
 5 S. FLAGLER AVE
 Address:
 5 S. FLAGLER AVE

 City-St-Zip:
 HOMESTEAD, FL 33030
 City-St-Zip:
 HOMESTEAD, FL 33030

 Name:
 WILLIAM, JEROME
 Name:
 WILLIAM, JEROME

 Address:
 2646 SE 19 CT.
 Address:
 2646 SE 19 CT.

 City-St-Zip:
 HOMESTEAD, FL 33035
 City-St-Zip:
 HOMESTEAD, FL 33035

Title: D () Delete Title: D (X) Change () Addition

 Name:
 RAMKISSOON, PARSURAM
 Name:
 GARCIA, ANTHONY

 Address:
 27077 S DIXIE HWY
 Address:
 690 N HOMESTEAD BLVD

 City-St-Zip:
 HOMESTEAD, FL 33032
 City-St-Zip:
 HOMESTEAD, FL 33030

Title: SDT () Delete Title: DT (X) Change () Addition

 Name:
 PEYTON, DAVID
 Name:
 PEYTON, DAVID

 Address:
 1550 N KROME AVE
 Address:
 1550 N KROME AVE

 City-St-Zip:
 HOMESTEAD, FL 33030
 City-St-Zip:
 HOMESTEAD, FL 33030

Title: D () Delete Title: () Change () Addition

 Intie:
 D
 () Delete
 Intie:

 Name:
 PIERCE, JAMES
 Name:

 Address:
 48 NE 15 STREET
 Address:

 City-St-Zip:
 HOMESTEAD, FL 33030
 City-St-Zip:

Title: D () Delete Title: D (X) Change () Addition

 Name:
 WILSON, SHÀRON
 Name:
 DOS SANTOS, ÂL

 Address:
 15600 SW 288 ST
 Address:
 250 E PALM DRIVE

 City-St-Zip:
 HOMESTEAD, FL 33030
 City-St-Zip:
 FLORIDA CITY, FL 33034

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: JEROME WILLIAMS C 01/07/2009