

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 730824

FILED
Jan 07, 2009
Secretary of State

Entity Name: BELLE GLADE CHAMBER OF COMMERCE, INC.

Current Principal Place of Business:

540 SOUTH MAIN STREET
BELLE GLADE, FL 33430

New Principal Place of Business:

Current Mailing Address:

540 SOUTH MAIN STREET
BELLE GLADE, FL 33430

New Mailing Address:

FEI Number: 59-0693260

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BUNTING, BRENDA A
540 SOUTH MAIN STREET
BELLE GLADE, FL 33430 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: P () Delete
Name: PIERSON, TOM
Address: 617 SE 12TH ST
City-St-Zip: BELLE GLADE, FL 33430

Title: 1V () Delete
Name: SCHOENFELD, RITA
Address: 400 GATOR BLVD.
City-St-Zip: BELLE GLADE, FL 33430

Title: 1V () Delete
Name: LUTZ, KENNETH
Address: 301 NW AVE C
City-St-Zip: BELLE GLADE, FL 33430

Title: S () Delete
Name: DEATON, JOANN
Address: P.O. BOX 35
City-St-Zip: BELLE GLADE, FL 33430

Title: T () Delete
Name: WHEELER, MIKE
Address: 108 SE AVE D
City-St-Zip: BELLE GLADE, FL 33430

Title: ED () Delete
Name: BUNTING, BRENDA
Address: 540 SOUTH MAIN STREET
City-St-Zip: BELLE GLADE, FL 33430

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: LUTZ, KEN
Address: 617 SE 12TH ST
City-St-Zip: BELLE GLADE, FL 33430

Title: 1V (X) Change () Addition
Name: CORBIN, KAREN
Address: 148 SE 5TH STREET
City-St-Zip: BELLE GLADE, FL 33430

Title: 2VP (X) Change () Addition
Name: CANO, JOSE
Address: 800 SOUTH MAIN STREET
City-St-Zip: BELLE GLADE, FL 33430

Title: S (X) Change () Addition
Name: HICKSON, KAY
Address: 1517 HALEY'S COURT
City-St-Zip: BELLE GLADE, FL 33430

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

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: BRENDA BUNTING

ED

01/07/2009

Electronic Signature of Signing Officer or Director

Date