

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 06, 2001 8:00 am
Secretary of State

04-06-2001 90063 042 ****61.25

0045135

DOCUMENT # 735822

1. Entity Name

GREATER FORT LAUDERDALE CHAMBER OF COMMERCE, INC

Principal Place of Business

512 NE THIRD AVE.
FT LAUDERDALE FL 33302-1516
US

Mailing Address

512 NE THIRD AVE.
FT LAUDERDALE FL 33302-1516
US

00020200



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

59-0250255

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

QUEIOR, STEPHEN
512 NE THIRD AVENUE
FT. LAUDERDALE FL 33301

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW:
FEE IS \$61.25

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make Check Payable to
Department of State

10. OFFICERS AND DIRECTORS

TITLE **CD** ☐ Delete
NAME **HAMPTON, WALTER**
STREET ADDRESS **2531 GULF VIEW DR.**
CITY-ST-ZIP **WESTON FL 33327**

TITLE **D** ☒ Delete
NAME **O'NEILL, JOHN**
STREET ADDRESS **1451 N.W. 62ND STREET**
CITY-ST-ZIP **FORT LAUDERDALE FL 33309**

TITLE **D** ☐ Delete
NAME **ROMNEY, ROGER**
STREET ADDRESS **1401 E. BROWARD BLVD.**
CITY-ST-ZIP **FORT LAUDERDALE FL 33302**

TITLE **P** ☐ Delete
NAME **QUEIOR, STEPHEN**
STREET ADDRESS **512 NE 3RD AVE.**
CITY-ST-ZIP **FORT LAUDERDALE FL 33301**

TITLE **TD** ☒ Delete
NAME **BENSON, ROBERT**
STREET ADDRESS **350 E. LAS OLAS BLVD. #1420**
CITY-ST-ZIP **FORT LAUDERDALE FL 33301**

TITLE **D** ☒ Delete
NAME **O'NEILL, JOHN**
STREET ADDRESS **4769 NE 11TH AVE.**
CITY-ST-ZIP **FORT LAUDERDALE FL 33334**

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE **D** ☒ Change ☐ Addition
NAME **HAMPTON, WALTER**
STREET ADDRESS **2531 GULF VIEW DRIVE**
CITY-ST-ZIP **WESTON, FL 33327**

TITLE **CD** ☐ Change ☒ Addition
NAME **DONNELLY, MICHAEL**
STREET ADDRESS **1000 W. McNAB RD.**
CITY-ST-ZIP **POMPANO BEACH, FL 33069**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE **TD** ☐ Change ☒ Addition
NAME **JONES, PATRICIA**
STREET ADDRESS **300 SE 2nd STREET**
CITY-ST-ZIP **FT LAUDERDALE, FL 33301**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental 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 this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

STEPHEN M QUEIOR
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (10/00)