2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jul 01, 2005
Secretary of State

DOCUMENT# 736425

Entity Name: GREATER FORT MYERS BEACH AREA CHAMBER OF COMMERCE, INC.

Current Principal Place of Business:

17200 SAN CARLOS BLVD
FORT MYERS BEACH, FL 33931 US

New Principal Place of Business:

Current Mailing Address:

17200 SAN CARLOS BLVD
FORT MYERS BEACH, FL 33931 US

New Mailing Address:

FEI Number: 59-0868976 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

PETRUCELLI, D.J.
17200 SAN CARLOS BLVD
FORT MYERS BEACH, FL 33931 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: CD ( ) Delete
Name: KATCKO, KEN
Address: 330 DONRA DRIVE
City-St-Zip: FORT MYERS BEACH, FL 33931

Title: P ( ) Delete
Name: PETRUCCELI, D.J.
Address: 7234 DRAKE DR.
City-St-Zip: FT MYERS BCH, F

Title: VD ( ) Delete
Name: CALABRESE, ROBIN
Address: 2910 SW 29TH
City-St-Zip: CAPE CORAL, FL 33914

Title: D ( ) Delete
Name: ROSS, JANE
Address: 819 SAN CARLOS DRIVE
City-St-Zip: FORT MYERS BEACH, FL 33931

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change ( ) Addition
Name: KATCKO, KEN
Address: 330 DONRA DRIVE
City-St-Zip: FORT MYERS BEACH, FL 33931

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

Title: CD (X) Change ( ) Addition
Name: CALABRESE, ROBIN
Address: 2910 SW 29TH
City-St-Zip: CAPE CORAL, FL 33914

Title: VD (X) Change ( ) Addition
Name: ROSS, JANE
Address: 819 SAN CARLOS DRIVE
City-St-Zip: FORT MYERS BEACH, FL 33931

I hereby certify that the information supplied with this filing does not qualify for the 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 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: D. J. PETRUCCELLI P 07/01/2005

Electronic Signature of Signing Officer or Director — Date