

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 740209

FILED  
Jan 20, 2009  
Secretary of State

**Entity Name:** UPPER TAMPA BAY REGIONAL CHAMBER OF COMMERCE, INC.

**Current Principal Place of Business:**

163 S.R. 580 WEST  
OLDSMAR, FL 34677 US

**New Principal Place of Business:**

**Current Mailing Address:**

163 S.R. 580 WEST  
OLDSMAR, FL 34677 US

**New Mailing Address:**

**FEI Number:** 59-2268316      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired (X)**

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

CUSTIN, GERALD F  
1849 SPUR LN  
PALM HARBOR, FL 34685 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: D ( ) Delete  
Name: GRIMES, SANDIE  
Address: 3939 TAMPA ROAD  
City-St-Zip: OLDSMAR, FL 34677

Title: D/T ( ) Delete  
Name: SUMMERS, STEVE  
Address: 7327 COURT STREET  
City-St-Zip: NEW PORT RICHEY, FL 34652

Title: D/S ( ) Delete  
Name: MESA, ELENA  
Address: 6001 WEBB ROAD  
City-St-Zip: TAMPA, FL 33615

Title: D (X) Delete  
Name: JACOBS, GERALD  
Address: 8370 W. HILLSBOROUGH AVE. STE. 205  
City-St-Zip: TAMPA, FL 33615

Title: D/TR (X) Delete  
Name: FRANK, DAVID  
Address: 4025 TAMPA ROAD SUITE 1206  
City-St-Zip: OLDSMAR, FL 34677

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: D/T (X) Change ( ) Addition  
Name: MOSHER, JOHN  
Address: 111 N. BELCHER SUITE 102  
City-St-Zip: CLEARWATER, FL 33765

Title: D (X) Change ( ) Addition  
Name: SUMMERS, STEVE  
Address: 7327 COURT STREET  
City-St-Zip: NEW PORT RICHEY, FL 34652

Title: D (X) Change ( ) Addition  
Name: JACOBS, GERALD  
Address: 8370 W. HILLSBOROUGH SUITE 205  
City-St-Zip: TAMPA, FL 33615

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: GERALD F. CUSTIN

P

01/20/2009

Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date