2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 28, 2007
Secretary of State

DOCUMENT# 754519

Entity Name: THE GREATER BRANDON CHAMBER OF COMMERCE, INC.

Current Principal Place of Business:

330 PAULS DR
SUITE 100
BRANDON, FL 33511 US

New Principal Place of Business:

Current Mailing Address:

330 PAULS DR
SUITE 100
BRANDON, FL 33511 US

New Mailing Address:

FEI Number: 59-0932212 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

BRACEWELL, TAMMY C
330 PAULS DR
SUITE 100
BRANDON, FL 33511 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:	BRACEWELL, TAMMY C	
Address:	330 PAULS DR., SUITE 100	
City-St-Zip:	BRANDON, FL 33511 US	
Title:	CD	( ) Delete
Name:	MURMAN, SANDRA	
Address:	330 PAULS DR., SUITE 100	
City-St-Zip:	BRANDON, FL 33511 US	
Title:	STD	( ) Delete
Name:	MASON, ANDY	
Address:	330 PAULS DR., SUITE 100	
City-St-Zip:	BRANDON, FL 33511 US	
Title:	CD	( ) Delete
Name:	MAY, GEORGE T IV	
Address:	330 PAULS DR., SUITE 100	
City-St-Zip:	BRANDON, FL 33511 US	
Title:	AD	( ) Delete
Name:	WOLFE, RANDOLPH	
Address:	330 PAULS DR., SUITE 100	
City-St-Zip:	BRANDON, FL 33511 US	
Title:	CD	( ) Delete
Name:	KOSAN, RICHARD R	
Address:	330 PAULS DR., SUITE 100	
City-St-Zip:	BRANDON, FL 33511	

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:	STD	(X) Change ( ) Addition
Name:	REGISTER, FRANCES	
Address:	330 PAULS DR., SUITE 100	
City-St-Zip:	BRANDON, FL 33511 US	
Title:	CD	(X) Change ( ) Addition
Name:	RAINEY, MARSHALL	
Address:	330 PAULS DR., SUITE 100	
City-St-Zip:	BRANDON, FL 33511 US	
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 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: TAMMY C. BRACEWELL P 02/28/2007

Electronic Signature of Signing Officer or Director — Date