2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

DOCUMENT # N04000003654

1. Entity Name

THE GREATER DELAND JUNIOR CHAMBER OF COMMERCE INC.



FILED Apr 12, 2007 08:00 A Secretary of State

Principal Place of Business

P.O. BÓX 1480 DELAND, FL 32721 Mailing Address

P.O. BOX 1480 DELAND, FL 32721



03142007 No Chg-NP

CR2E037 (4/06)

4. FEI Number 86-1116176 Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

LEVESQUE, RHONDA 360 STEWART 6 AVE DELAND, FL 32720

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,				IN	THIS SPACE					
	named entity submits this statement for ions of registered agent.	or the purpose of changing its registere	d office or r	egistered agent, or bo	oth, in the State of Florida. I am familiar with, and accept					
SIGNATURE Signature: typed or printed name of registered agent and title if applicable (NOTE: Registered Agent aignature required when renstating) DATE										
	Filing Fee is \$61.25 Due by May 1, 2007	Election Campaign Finan Trust Fund Contribution.	cing	\$5.00 May Be Added to Fees	·					
10.	OFFICERS AND DIRECTORS									
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP ILSLEY, TAMMIE 1102 E VOORHIS AVE DELAND, FL 32724				U00000703274 04/20/07-80132-012 61.25					
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP BROWN, CHRISTINE 370 HILL RD DELAND, FL 32724				04/20/01-00102-012-01.23					
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P FISHER, CRYSTAL 1118 E VOORHIS AVE DELAND, FL 32724			DO	NOT WRITE					
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S FUHRMANN, KAREN 45834 MAGNOLIA ST PAISLEY, FL 32767			IN [.]	THIS SPACE					
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T LEVESQUE, RHONDA 1140 15 ST ORANGE CITY, FL 32763	:								

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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.

CI		T	ID	

FISHER, DAVID

1118 E VOORHIS AVE

DELAND, FL 32724

NAME

STREET ADDRESS

CITY-ST-ZIP

IGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

honda Levesma

4/10/07

Daytime Phone #