

# **2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N04822

**FILED**  
**Apr 25, 2012**  
**Secretary of State**

**Entity Name:** GREATER PLANT CITY CHAMBER OF COMMERCE, INC.

**Current Principal Place of Business:**

106 N EVERS ST  
P. O. DRAWER CC  
PLANT CITY, FL 33563 US

**New Principal Place of Business:**

**Current Mailing Address:**

P O DRAWER CC  
PLANT CITY, FL 335649021 US

**New Mailing Address:**

**FEI Number:** 59-0550230

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

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

SMITH, MARION M  
106 N EVERS ST  
PLANT CITY, FL 33563 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: PCD  
Name: BUZZA, MATTHEW  
Address: 1804 JAMES L. REDMAN PARKWAY  
City-St-Zip: PLANT CITY, FL 33563

Title: VCD  
Name: WILLIAMS, LEE  
Address: 617 NORTH MARYLAND AVE  
City-St-Zip: PLANT CITY, FL 33563

Title: CED  
Name: SCOTT, JIM  
Address: 2000 EAST BAKER STREET  
City-St-Zip: PLANT CITY, FL 33563

Title: TD  
Name: KILTON, NATE  
Address: 104 N EVERS STREET STE 202  
City-St-Zip: PLANT CITY, FL 33563

I hereby 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 all other like empowered.

SIGNATURE: MATTHEW BUZZA

PCD

04/25/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date