2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N07203

FILED
May 03, 2000 8:00 am
Secretary of State
05-03-2000 90008 004 ****61.25

1. Entity Name

GREATER CLEARWATER CHAMBER OF COMMERCE, INC.

Principal Place of Business	Mailing Address
1130 CLEVELAND ST. CLEARWATER FL 34615 US	1130 CLEVELAND ST. CLEARWATER FL 33755-4841 US

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip 33755 / Country	Zip 33755 / Country

4. FEI Number 59-0196955 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
RABON, KATHY S 1130 CLEVELAND ST. CLEARWATER FL 34615	Name Michael G Meidel Street Address (P.O. Box Number is Not Acceptable) 1130 Cleveland Street City Clearwater **FL** Zip Code 33755

8. 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 Michael Meidel Michael Meidel, President/CEO
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW: FEE IS $61.25

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

Make Check Payable to Department of State

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	CD MITCHELL, JUDY 1475 S. BELCHER RD LARGO FL	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TD Pat Duffy 121 N. Osceola Ave Clearwater, FL	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TD GRAY, GARY S 1150 CLEVELAND STREET CLEARWATER FL 33755	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VD	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VD ARMSTRONG, E.D. 911 CHESTNUT CLEARWATER FL 34616	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	CD	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VD MURPHY, FRANK 323 JEFFORDS ST. CLEARWATER FL	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	17757 US HWY 19 N #100	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VD CONNELLY, JOHN P 630 CHESTNUT ST. CLEARWATER FL 33756	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VD MEIDEL, MIKE 17757 US HWY 19 N. CLEARWATER FL 33757	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VD Holly Duncan 1206 Druid Rd Clearwater, FL	☐ Change ☒ Addition

CR2E037 (9/99)

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

SIGNATURE: SIGNATURE REQUIRED 2-15-00
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #