

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
May 04, 2004 8:00 am
Secretary of State

05-04-2004 90186 026 ****61.25

DOCUMENT # N07203

1. Entity Name
**GREATER CLEARWATER CHAMBER OF COMMERCE,
INC.**



Principal Place of Business
1130 CLEVELAND ST.
CLEARWATER, FL 33755 US

Mailing Address
1130 CLEVELAND ST.
CLEARWATER, FL 33755 US

24068925



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

02192004

Chg-NP

CR2E037 (10/03)

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

MEIDEL, MICHAEL G
1130 CLEVELAND ST.
CLEARWATER, FL 33755

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**Filing Fee is \$61.25
Due by May 1, 2004**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

**Make check payable to
Florida Department of State**

10. OFFICERS AND DIRECTORS

TITLE CD ☐ Delete
NAME FERRARA, RAYMOND
STREET ADDRESS 611 E DRUID RD., #105
CITY-ST-ZIP CLEARWATER, FL 337563957

TITLE VD ☒ Delete
NAME GRAY, GARY S
STREET ADDRESS 1150 CLEVELAND STREET
CITY-ST-ZIP CLEARWATER, FL 33755

TITLE VD ☐ Delete
NAME CAMPBELL, GLORIA
STREET ADDRESS 23494 US HWY 19 NORTH
CITY-ST-ZIP CLEARWATER, FL 337651561

TITLE VD ☐ Delete
NAME RENTROW, JEANETTE
STREET ADDRESS 1680 GULF TO BAY BLVD
CITY-ST-ZIP CLEARWATER, FL 33756

TITLE PD ☐ Delete
NAME MEIDEL, MICHAEL G
STREET ADDRESS 1130 CLEVELAND ST
CITY-ST-ZIP CLEARWATER, FL 33755

TITLE VD ☐ Delete
NAME DUNCAN, HOLLY
STREET ADDRESS 1200 DRUID RD
CITY-ST-ZIP CLEARWATER, FL 33757

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE VD ☒ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE VD ☐ Change ☒ Addition
NAME Doug Gruska
STREET ADDRESS 1816 US Hwy 19 N #200
CITY-ST-ZIP Clearwater, FL 33764

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE CD ☒ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #