SECOND NOTICE: CORPORATION WILL BE D. SOLVEU GIN C. (AFTER SEFTE ERC.), 1. AMOUNT DUE ON OR BEFORE 09/30/98: \$61.25 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$236.25).

NONPROFIT
CORPORATION
ANNUAL REPORT
1998

SIGNATURE:



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham

Secretary of State

DIVISION OF CORPORATIONS

DOCUMENT # N07880

(0)

APOLLO BEACH CHAMBER OF COMMERCE, INC.

FILED

98 DEC 18 PM 6: 42

SECRETARY OF STATE
TALL AHASSEE, FLORIDA

Principal Plac	e of Business	Mailing Address		1	DEI	ー (1940) () () () () () () () () () () () () ()	ا	
5914 FORTUNE PLACE 5914 FORTUNE PLACE				1	MEII	VO MIEWEN TOO	坏	
APOLLO BEACH FL 33572 APOLLO BEACH FL 33572						02/27/1985	ĺ	
4						4. FEI Number Applied For		
						59-2622690 Not Applicate	Лe	
Principal Place of Business Za. Mailing Address				-		5. Certificate of Status Desired \$8.75 Additional		
21 6432 Hwy 41 N. 26 6432						Fee Required	_	
Suite, Apt.	#, etc.	Suite, Apt. #, etc.	 			6. Election Campaign Financing \$5.00 May Be		
22 City & Stat	City & State	v & State			Trust Fund Contribution	긕		
23 Apollo Beach, Fl. 28 Apollo Be			ach.	T T		7. Is this nonprofit corporation a homeowners association?		
Zip Country Zip				Country 8. This corporation owes or has paid the current year Intangible			\dashv	
24 3357	2 25	_ 	00	•		Personal Property Tax due June 30. X Yes No		
	9. Name and Address of Current	Registered Agent				10. Name and Address of New Registered Agent	\Box	
				81 N	ame			
PETERSON, MICHAEL L 82 Street Add					treet Addr	Iress (P.O. Box Number is Not Acceptable)	ᅥ	
218 APOLLO BEACH BOULEVARD						The second secon	_	
APOLLO BEACH FL 33572				83		•	- 1	
				84 Ci	itv	85 Zip Code		
dd Diversions	a the provisions of sections 617 0502 a	and Ca7 4500 Florida Ctabutas N			ئىسىنى	of an authority this statement to the purpose of sharping to relationed		
11. Pursuant to the provisions of sections 617,0502 and 617,1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered								
office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, section 617,0503, Florida Statutes.								
SIGNATURE	Signature, typed or printed name of registered agent	and title if applicable. (NOTE	Registere	d Agent s	sionature redu	rulrad when reinstating) DATE		
12.	OFFICERS ANI		13.			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	-	
TITLE	PD	▼ DELETE	1.1 ΠΠ	E	P	resident X Change Addition	on :	
NAME	PETERSON, MICHAEL L	 -	1.2 NA	ΜE		Ron Friedrich (D)		
	662 YARDARM DR.		1.3 STR	EET ADD!	RESS 2	50 Apollo Beach Blvd.		
CITY-ST-ZIP	APOLLO FL 33572		1.4 CIT	Y-ST-ZIP		pollo Beach, Fl 33572		
TITLE	VP			LE		ice President 🔀 Change 🗌 Addition	on '	
NAME 🕶	STRANDBERG, JOHNN W					ruce Fisher (D)		
J	11001 1001		2.3 STR			.025 Apollo Beach Blvd.		
				Y-ST-ZIP	A	Apollo Beach, Fl33572		
TITLE	SD DELETE 3.					Secretary \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \		
				3.2 NAME A:		nne Hiltz (D)		
· •			1	0		025 Golf & Sea Blvd.	_	
CITY-ST-ZIP	TD DELETE 4:						_	
	RADNOTI, LINDA	FXDETELE	4.2 NA				100	
	10501 DEEPBROOK DRIVE		1	EET ADDI	RESS C	ay Weedon (D)		
]	RIVERVIEW FL 33569			Y-ST-ZIP	10.	39 Birdie Way		
TITLE		DELETE	5.1 TITI		A [pollo Beach, Fl. 33572	on	
NAME			5.2 NAN	Æ	-		J	
STREET ADDRESS			5.3 STR	EET ADDF	RESS	6000027238561	٠	
CITY-ST-ZIP			5.4 CIT	Y-ST-ZIP		-12/28/9801130001 -12/28/98-01130001		
TITLE		DELETE	6.1 Ππ	E		*****236_25	оп	
NAME		-	6.2 NA	ΛE	J	.]	
STREET ADDRESS			6.3 STR	EET ADD	RESS			
CITY-ST-ZIP		11.7 EA 1 2 19		Y-ST-ZIP		440 07/00/00 57/44 00 444 144	\dashv	
14. I hereby o	erury that the information supplied with on this annual report or supplemental :	this ming does not qualify for the annual report is true and accura-	exempt te and ti	uon stā hat my	ited in sec signature	cuon 119.07(3)(i), Fionda Statutes. I further certify that the information e shall have the same legal effect as if made under oath; that I am		
14. 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 annual report or supplemental annual 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 12 or Block 13 if chapted, or on an attachment with an address.								