


FILE NOW: FILING FEE IS \$61.25

FILED  
May 01 1997 8:00am  
Secretary of State

<b>NONPROFIT CORPORATION ANNUAL REPORT 1997</b>				<b>FLORIDA DEPARTMENT OF STATE</b> <b>Sandra B. Mortham</b> Secretary of State DIVISION OF CORPORATIONS																																																																																																																																																	
<b>DOCUMENT # N08638 (1)</b> 1. Corporation Name <b>GLADES COUNTY CHAMBER OF COMMERCE, INC.</b>																																																																																																																																																					
Principal Place of Business <b>U.S. HIGHWAY 27 AND TENTH STREET</b> <b>PO BOX 490</b> <b>MOORE HAVEN FL 33471</b>			Mailing Address <b>P.O. BOX 490</b> <b>MOORE HAVEN FL 33471-0490</b> <b>US</b>																																																																																																																																																		
2. Principal Place of Business <b>21</b> Suite, Apt. #, etc. <b>22</b> City & State <b>23</b> Zip <b>24</b> Country		2a. Mailing Address <b>26</b> Suite, Apt. #, etc. <b>27</b> City & State <b>28</b> Zip <b>29</b> Country		3. Date Incorporated or Qualified <b>04/11/1985</b> 3a. Date of Last Report <b>02/27/1996</b> 4. FEI Number <b>59-0520424</b> 5. Certificate of Status Desired <input type="checkbox"/> <b>\$8.75 Additional Fee Required</b> 6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b> 8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input type="checkbox"/> No																																																																																																																																																	
9. Name and Address of Current Registered Agent <b>SMELEY, SUSAN</b> <b>215 10TH STREET</b> <b>MOORE HAVEN FL 33471</b>			10. Name and Address of New Registered Agent <b>81</b> Name <b>82</b> Street Address (P.O. Box Number is Not Acceptable) <b>83</b> <b>84</b> City <b>FL</b> <b>85</b> Zip Code																																																																																																																																																		
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 agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes. SIGNATURE <i>Susan Smelley</i> <b>Susan Smelley</b> <b>4-21-97</b> Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE																																																																																																																																																					
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14. I do 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 changed, or on an attachment with an address. SIGNATURE <i>James Smelley, Jr.</i> <b>James Smelley, Jr.</b> <b>4-21-97</b> <b>941-946-0440</b> Signature and typed or printed name of signing officer or director Date Daytime Phone # 0044430																																																																																																																																																					

CR2E037 (9/96)