

**2003 NOT-FOR-PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
Feb 21, 2003 8:00 am
Secretary of State

02-21-2003 90233 003 ****61.25



DOCUMENT # N13329

1. Entity Name
THE GREATER SEFFNER AREA CHAMBER OF COMMERCE, IN C.

Principal Place of Business
**2314 SO PARSONS AVE
SEFFNER FL 33584**

Mailing Address
**P.O. BOX 1920
SEFFNER FL 33583-1920**

2. Principal Place of Business
Suite, Apt. #, etc.

3. Mailing Address
Suite, Apt. #, etc.

City & State
Zip Country

City & State
Zip Country

4. FEI Number **59-2849897** Applied For
Not Applicable

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



CHECK HERE IF MAKING CHANGES

6. Name and Address of Current Registered Agent

**BOSSETT, JEFFREY
701 DR M.L. KING, JR. BLVD
SEFFNER FL 33584**

7. Name and Address of New Registered Agent

Name **Bassett, Jeffrey**
Street Address (P.O. Box Number is Not Acceptable)
701 Dr. M.L. King Jr. Blvd.
City **Seffner** FL Zip Code **33584**

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

2/16/03
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 Florida Department of State

10. OFFICERS AND DIRECTORS

TITLE	S	<input type="checkbox"/> Delete
NAME	MAGRUFER, PATRICIA A	
STREET ADDRESS	115 MARGARET STREET SUITE F	
CITY-ST-ZIP	BRANDON FL 33511	
TITLE	T	<input type="checkbox"/> Delete
NAME	ROBSON, GAYLE	
STREET ADDRESS	1707 PARONS AVENUE S	
CITY-ST-ZIP	SEFFNER FL 33584	
TITLE	P	<input type="checkbox"/> Delete
NAME	BASSETT, JEFFREY	
STREET ADDRESS	701 DR. M.L. KING, JR. BLVD	
CITY-ST-ZIP	SEFFNER FL 33584	
TITLE	D	<input type="checkbox"/> Delete
NAME	HOUGABOOK, EARL	
STREET ADDRESS	702 N FRANKLIN STREET	
CITY-ST-ZIP	TAMPA FL 33601	
TITLE	D	<input type="checkbox"/> Delete
NAME	BARGO, JAMES	
STREET ADDRESS	11808 E HWY 92	
CITY-ST-ZIP	SEFFNER FL 33584	
TITLE	D	<input type="checkbox"/> Delete
NAME	POPE, CHARLES	
STREET ADDRESS	101 EVANS STREET	
CITY-ST-ZIP	BRANDON FL 33510	

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	Secretary	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Cheri Smith	
STREET ADDRESS	Holiday Inn Express	
CITY-ST-ZIP	510 Grand regency Blvd. Brandon FL 33510	
TITLE	Treasurer	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Jill Clements	
STREET ADDRESS	1209 Deepwood Ct.	
CITY-ST-ZIP	Brandon FL 33511	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> 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 I am empowered.

SIGNATURE:

2/16/03 (813) 651-4508
Date Daytime Phone #

CR2E037 (10/02)