2000 UNIFORM BUSINESS REPORT (UBR)

FILED DOCUMENT # N24757 Jul 19, 2000 8:00 am 1. Entity Name Secrétary of State THE CHAMBER OF SOUTHWEST FLORIDA, INC. 07-19-2000 90025 009 ****61.25 Mailing Address Principal Place of Business 1520 ROYAL PALM SQUARE BLVD 1520 ROYAL PALM SOUARE BLVD. SUITE 210 SUITE 210 FT. MYERS FL 33919 FT. MYERS FL 33919 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Applied For City & State City & State 4. FEI Number 65-0028894 Not Applicable Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) _TIREY_STEPHEN_T.__ 1520 ROYAL PALM SQ. BLVD., STE 210 FORT MYERS FL 33919 Zip Code City FL 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 Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing FILE NOW: FEE IS \$61.25 Make Check Payable to \$5.00 May Be Trust Fund Contribution. Added to Fees Department of State After September 13, 2000 min. will be \$236.25 OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. 11. TD X Change ☐ Addition TITLE ☐ Delete TITLE WILLENBACHER, LEO NAME NAME 1520 ROYAL PALM SQ. BLVD., STREET ADDRESS STREET ADDRESS FORT MYERS FL 33919 CITY-ST-ZIP CITY-ST-ZIP ☐ Addition TITLE ☐ Delete Change TIREY, STEPHEN T. NAME NAME 1002 SE 21ST AVENUE STREET ADDRESS STREET ADDRESS CAPE CORAL FL CITY-ST-ZIP CITY-ST-ZIE ☐ Delete TITLE ★ Change ☐ Addition TITLE CHAIPEL, CLIFF NAME NAME 12660 WORLD PLAZA LANE STREET ADDRESS STREET ADDRESS FT. MYERS FL 33907 CITY_ST_ZIP CITY-ST-ZIP CD X7 Change ☐ Addition ☐ Delete TITI F TITLE WHIDDEN, GROVER NAME NAME 1926 VICTORIA AVE STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIE FT. MYERS FL TITLE ☐ Change Addition XX Delete TITLE SCHMOYER, JERRY NAME NAME Grady, Beverly STREET ADDRESS 24301 WALDEN CENTER DR., STE 300 STREET ADDRESS 2320 First St. Ste. 100 CITY-ST-7IP CITY-ST-ZIF BONITA SPRINGS FL 34134 Fort Myers, FL 33901 Change **X** Addition TITLE Delete TITLE Barrett, Newt SABEAN, BRAIN NAME NAME 12811 Kenwood Lane STREET ADDRESS 10491 SIX MILE CYPRESS PKWY STREET ADDRESS Fort Myers, FL 33907 CITY-ST-ZIP CITY-ST-ZIP FT. MYERS FL 33912 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 redeiver of 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 with all other like empowered.

Stephen TETirey

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

SIGNATURE:

President & CEO

7/12/00

Daytime Phone #

Oate