

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
May 03, 2004 8:00 am
Secretary of State

05-03-2004 91221 048 ****61.25

DOCUMENT # N31121					
1. Entity Name FLORIDA CENTER CHAMBER OF COMMERCE INCORPORATED					
Principal Place of Business 5850 LAKEHURST DR ORLANDO FL 32819 US			Mailing Address 5850 LAKEHURST DR ORLANDO FL 32819 US		
2. Principal Place of Business		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State		4. FEI Number 59-2945812	
Zip		Country		5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent HUNTER, MARTIN P. 7050 KIRKMAN ROAD ORLANDO FL 32819				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					
FILE NOW: 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			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D DONOVAN, DAN 1000 UNIVERSAL STUDIOS ORLANDO FL 32819	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Barbara Kenney 2910 Spruce Ave. Orlando, FL	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP KILMER, STEVE 8504 UNIVERSAL BLVD ORLANDO FL 32819	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Trisha Warner P.O. Box 10020 Lake Buena Vista, FL 32830	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P MERTZ, GARY 7400 INTERNATIONAL DR ORLANDO FL 32819	☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	T Michael Pingston 5859 American Way Orlando, FL 32819	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D GRAN, JIM 5905 S. KIRKMAN RD ORLANDO FL 32819	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Karen Friend 13500 St. Road 535 Lake Buena Vista, FL 32821	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D PINGSTON, MIKE 5859 AMERICAN WAY ORLANDO FL 32819	☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Terry Ross 9800 International Dr. Orlando, FL 32819	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D PRICE, KEVIN 3300 EXCHANG PLACE LAKE MARY FL 32746	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Rob Picci 8741 International Dr Orlando, FL 32819	☐ Change ☒ Addition
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: 4/25/04 Daytime Phone #: 407-903-0084		