

# 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N31121

FILED  
Feb 17, 2010  
Secretary of State

**Entity Name:** FLORIDA CENTER CHAMBER OF COMMERCE INCORPORATED

**Current Principal Place of Business:**

7557 WEST SAND LAKE ROAD  
#162  
ORLANDO, FL 32819 US

**New Principal Place of Business:**

**Current Mailing Address:**

7557 WEST SAND LAKE ROAD  
#162  
ORLANDO, FL 32819 US

**New Mailing Address:**

**FEI Number:** 59-2945812      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

TRISCARI, MARIA  
7557 WEST SAND LAKE ROAD  
#162  
ORLANDO, FL 32819 US

**Name and Address of New Registered Agent:**

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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

**OFFICERS AND DIRECTORS:**

Title: D  
Name: DONOVAN, DAN  
Address: 1000 UNIVERSAL STUDIOS  
City-St-Zip: ORLANDO, FL 32819

Title: D  
Name: VINCIGUERRA, STEVE  
Address: 7007 SEAWORLD DR  
City-St-Zip: ORLANDO, FL 32821

Title: D  
Name: KENNEY, BARBARA  
Address: 2910 SPRUCE AVE.  
City-St-Zip: ORLANDO, FL 32819

Title: D  
Name: TRISCARI, MARIA  
Address: 7557 WEST SAND LAKE ROAD #162  
City-St-Zip: ORLANDO, FL 32819

Title: D  
Name: QUERIS, MAYRA  
Address: P.O. BOX 10020  
City-St-Zip: LAKE BUENA VISTA, FL 32830

Title: P  
Name: ADDISON, JAN  
Address: 9800 INTERNATIONAL DRIVE  
City-St-Zip: ORLANDO, FL 32819

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.

SIGNATURE: MARIA TRISCARI

D

02/17/2010

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date