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Secretary of State

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NONPROFIT CORPORATION ANNUAL REPORT **1999**

FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # N94000002493

1. Corporation Name
PORT ST. JOHN JUNIOR CHAMBER OF COMMERCE, INC.

560993 - 90078 - 10

Principal Place of Business	Mailing Address
3535 N US 1 SUITE 3 COCOA FL 32926	3535 N US 1 SUITE 3 COCOA FL 32926

2. Principal Place of Business 21 3935-L N.U.S.1 22 Suite, Apt. #, etc. 23 City & State: Cocoa, Fl. 24 Zip: 32926 25 Country: USA	2a. Mailing Address 26 3935-L N. U.S.1 27 Suite, Apt. #, etc. 28 City & State: Cocoa, Fl. 29 Zip: 32926 30 Country: USA	3. Date Incorporated or Qualified: 05/16/1994 4. FEI Number: 59-3244733 ☐ Applied For ☐ Not Applicable 5. Certificate of Status Desired ☐ $6.75 Additional Fee Required 6. Election Campaign Financing Trust Fund Contribution ☐ $5.00 May Be Added to Fees

9. Name and Address of Current Registered Agent

HIGGINBOTHAM, TRACEY C
3535 N US 1
SUITE 3
COCOA FL 32926

10. Name and Address of New Registered Agent

81 Name: Higginbotham, Tracey C.
82 Street Address (P.O. Box Number is Not Acceptable): 3935-L N. U.S.1
83
84 City: Cocoa FL 85 Zip Code: 32926

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: Tracey C. Higginbotham — TRACEY C. HIGGINBOTHAM — 4/20/99
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS

Title	Name	Street Address	City-St-Zip	Delete
D	POWERS, KATHY	1140 BAYMEADOWS DRIVE	TITUSVILLE FL	☐
D	VELLIGAN, STEVE	6725 CECIL ROAD	COCOA FL 32927	☒
D	HIGGINBOTHAM, NANCY	6545 BIRCH DR.	COCOA FL 32927	☐
D	POWERS, GAVER	1140 BAYMEADOWS DR.	TITUSVILLE FL 32796	☒
				☐
				☐

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

		Change	Addition
1.1 Title, 1.2 Name, 1.3 Street Address, 1.4 City-St-Zip		☐	☐
2.1 Title, 2.2 Name, 2.3 Street Address, 2.4 City-St-Zip		☐	☐
3.1 Title, 3.2 Name, 3.3 Street Address, 3.4 City-St-Zip		☐	☐
4.1 Title, 4.2 Name, 4.3 Street Address, 4.4 City-St-Zip		☐	☐
5.1 Title	D	☐	☒
5.2 Name	TRACEY C. HIGGINBOTHAM		
5.3 Street Address	3935-L N. U.S.1		
5.4 City-St-Zip	COCOA, FL. 32926		
6.1 Title, 6.2 Name, 6.3 Street Address, 6.4 City-St-Zip		☐	☐

14. 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 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, with all other like empowered.

SIGNATURE: Nancy Higginbotham — NANCY HIGGINBOTHAM TREASURER — 4/01/99 — 407-632-5726
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

CR2E037 (11/98)