

2012 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT**FILED
May 23, 2012
Secretary of State**

DOCUMENT# N95000005589

Entity Name: CLEARWATER BEACH CHAMBER OF COMMERCE, INC.**Current Principal Place of Business:**333 C S GULFVIEW
CLEARWATER BEACH, FL 33767**New Principal Place of Business:****Current Mailing Address:**PO BOX 3573
CLEARWATER BEACH, FL 33762**New Mailing Address:**

FEI Number: 59-3353083

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:DARLENE KOLE CB.C OF C
333 C S. GLUFVIEW BLVD
CLEARWATER BEACH, FL 33767 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: C
Name: ANDREWS, PAUL
Address: 601 SO. GULFVIEW BLVD.
City-St-Zip: CLEARWATER BCH, FL 33767Title: VC
Name: WALTZ, ERIC
Address: 500 MANDALAY AVE
City-St-Zip: CLEARWATER BCH, FL 33767Title: D
Name: WEST, CRAIG
Address: 1680 GULF TO BAY BLVD
City-St-Zip: CLEARWATER, FL 33755Title: TRES
Name: STAVROPOULOS, LOUIE
Address: 200 ISLAND WAY
City-St-Zip: CLEARWATER BCH, FL 33767Title: PRES
Name: KOLE, DARLENE
Address: 333 C SO. GULFVIEW BLVD.
City-St-Zip: CLEARWATER BEACH, FL 33767Title: S
Name: GIBERTONI, JASON
Address: 692 BAYWAY BLVD #204
City-St-Zip: CLEARWATER, FL 33767

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: DARLENE KOLE

PRES

05/23/2012

Electronic Signature of Signing Officer or Director

Date