2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR) Feb 11, 2008 08:00 AM Secretary of State **DOCUMENT # N96000003497** 1. Entity Name THE CITIES OF OAKLAND PARK/WILTON MANORS CHAMBER OF COMMERCE, INC. Principal Place of Business Mailing Address 1628 N. FEDERAL HIGHWAY P. O. BOX 70115 OAKLAND PARK FL 33307 SUITE 200 FORT LAUDERDALE FL 33305 2. Principal Place of Business - No P.O. Box # 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 1st MOORE CR2E037 (10/07) City & State City & State 4. FEI Number 65-0683826 Zip Country Zιρ Country 5. Certificate of Status Desired 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name HART, TIMOTHY S Street Address (P.O. Box Number is Not Acceptable) 3081 E. COMMERCIAL BLVD. SUITE 200 A FORT LAUDERDALE FL 33308 City 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: Bug stored Agent signature required when reinstating) FILE NOW: FEE IS \$61.25 **\$5.00** May Be 9. Election Campaign Financing

Due By May 1, 2008

Trust Fund Contribution.

Added to Fees

Make Check Payable to Florida Department of State

FILED

Applied For

\$8.75 Additional

Zip Code

Not Applicable

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10. OFFICERS AND DIRECTORS			11.	. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10			
TITLE	PD PARKER, DAVID	☐ Delote	TITLE	1	Change	☐ Addition	
NAME	2400 N. FEDERAL HWY.		NAME				
Giragi Matricoo	FORT LAUDERDALE FL 33305		STREET ADDRESS				
CITY-ST-ZIP			CITY-ST-ZIP				
FITLE	VPD	Delete	TITLE	1	🔲 Change	Addition	
NAME	HART, TIMOTHY S		NAME	ران الماريخ الم			
STREET ADDRESS	3081 E. COMMERCIAL BLVD. SUITE 200 A		STREET ADDRESS	U00000823310 02/20/08-80032-00	n ex ne		
CITY-ST-ZIP	FORT LAUDERDALE FL 33308		CITY-ST-ZIP	05/50/08-80035-00	8 bl.45)	
IIILE	TD	Delate	TITLE		Change	Addition	
NAME	MENDOZA, DOUGLAS		NAME				
STREET ADDRESS	1628 N. FEDERAL HWY		STREET ADDRESS			[
CITY-ST-ZIP	FORT LAUDERDALE FL 33301		CITY-ST-ZIP				
TITLE	SD	☐ Delete	TIFLE.		Change	Addition	
NAME	FEINBERG, BILL		NAME				
STREET ADDRESS	608 W. OAKLAND PARK BLVD.		STREET ADDRESS				
CITY+ST-ZIP	OAKLAND PARK FL 33307		CITY-ST-ZIP				
TITLE	D	Delete	TITLE		☐ Change	☐ Addition	
NAME	TRANTALIS, DEAN		NAME				
STREET AUDRESS	2255 WILTON DRIVE		STREET ADOPESS				
CITY-ST-ZIP	WILTON MANORS FL 33305		CITY-ST-ZIP				
TITLE	D	☐ Delete	TITLE		Change	Addition	
NAME	BOLAN, WAYNE		NAME		·		
STREET ADDRESS	901 PROGRESSO DRIVE, SUITE U2		STREET ADDRESS				
CITY-ST-ZIP	FORT LAUDERDALE FL 33304		CITY-ST-ZIP				
The state of the s							

I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, 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 cath, that I amen 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:

NO WENDOZA