2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N96000004850

FILED Apr 26, 2009 Secretary of State

Entity Name: SOUTH ORANGE CHAMBER OF COMMERCE, INC.

Current Principal Place of Business: New Principal Place of Business: 405 LARUE STREET ORLANDO, FL 32809 **Current Mailing Address: New Mailing Address:** PO BOX 593155 ORLANDO, FL 328593155 US FEI Number: 59-3408141 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: STEMBERGER, JOHN 4853 SOUTH ORANGE AVENUE ORLANDO, FL 32806 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete () Change () Addition BEARDSLEE, JUDY Name: Name: 405 LAURE AVE Address: Address: City-St-Zip: ORLANDO, FL 32809 City-St-Zip: Title: Title: (X) Change () Addition () Delete MAINGUTH, GREGORY J Name: MAINGUTH, GREGORY J Name: Address: 1201 MELISSA AVENUE Address: 1000 LEGION PL. STE 100 City-St-Zip: ORLANDO, FL 32807 City-St-Zip: ORLANDO, FL 32801 Title: () Delete Title: () Change () Addition VOGT, PETE Name: Name: 5850 HANSEL AVENUE Address: Address: City-St-Zip: ORLANDO, FL 32809 City-St-Zip: Title: () Delete Title: D (X) Change () Addition Name: KRIEGER, PATTI Name: BAILEY, ART 2703 SO. ORANGE AVE 3975 FORRESTAL AVE Address: Address: City-St-Zip: ORLANDO, FL 32806 City-St-Zip: ORLANDO, FL 32806 Title: () Delete Title: (X) Change () Addition BEARDSLEE, JUDY MIODIGH, SANDRA Name: Name: 405 LARUE STREET 405 LARUE STREET Address: Address: City-St-Zip: ORLANDO, FL 32809 City-St-Zip: ORLANDO, FL 32809 Title: () Delete Title: (X) Change () Addition BAILEY, ART REAHL, CRAIG Name: Name: Address: 3975 FORRESTAL AVE Address: 1024 NO MILLS AVE ORLANDO, FL 32806 ORLANDO, FL 32803 City-St-Zip: City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: GREGORY MAINGUTH T 04/26/2009