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NONPROFIT CORPORATION ANNUAL REPORT
1999

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

DOCUMENT # N97000001356

1. Corporation Name
DELTONA AREA CHAMBER OF COMMERCE, INC.

Principal Place of Business	Mailing Address
682 DELTONA BLVD DELTONA FL 32725 US	682 DELTONA BLVD DELTONA FL 32725 US

2. Principal Place of Business 21 Same as mailing address	2a. Mailing Address 26 1200 Deltona Blvd.	3. Date Incorporated or Qualified 03/11/1997
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27 Suite 10	4. FEI Number NOT APPLICABLE ☐ Applied For ☐ Not Applicable
City & State 23	City & State 28 Deltona, FL	5. Certificate of Status Desired ☐ $8.75 Additional Fee Required
Zip / Country 24 25	Zip / Country 29 32725-6364 30 USA	6. Election Campaign Financing Trust Fund Contribution ☐ $5.00 May Be Added to Fees

9. Name and Address of Current Registered Agent

GREATER WEST VOLUSIA CHAMBER OF COMMERCE
682 DELTONA BOULEVARD
DELTONA FL 32725

10. Name and Address of New Registered Agent

81 Name: LINDA S. WHITE
82 Street Address (P.O. Box Number is Not Acceptable): 1200 Deltona Blvd.
83: Suite 10
84 City: Deltona FL 85 Zip Code: 32725-6364

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: Linda S. White DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	CD GUNTER, RICH 155 S HIGHWAY 17-92 DEBARY FL 32713	☒ DELETE	1.1 TITLE / 1.2 NAME / 1.3 STREET ADDRESS / 1.4 CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	CED LONK, MICHAEL ~~2750-B ENTERPRISE ROAD~~ 138 S. Hwy 17-92 ~~ORANGE CITY FL 32763~~ DeBary, FL, 32713	☐ DELETE	2.1 TITLE P/D 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP	MICHAEL K. LONK 138 S. HIGHWAY 17-92 DEBARY, FL 32713	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TD HEYEN, JACK 865 W NEW YORK AVENUE DELAND FL 32720	☒ DELETE	3.1 TITLE V/D 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP	KATI HUGHES 377 RUTH JENNINGS DR. DEBARY, FL 32713	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VCD WHITE, LINDA 1908 SALEM COURT DELTONA FL 32738	☒ DELETE	4.1 TITLE T/D 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP	GARY S. WRIGHT 301 N. VOLUSIA AVE. ORANGE CITY, FL 32763	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VCD GRASSO, GEORGEANN P O BOX 6283 DELTONA FL 32738	☒ DELETE	5.1 TITLE S/D 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP	KRISTINE SMITH 111 S. ALABAMA DELAND, FL 32721	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ DELETE	6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP		☐ Change ☐ Addition

CR2E037 (5/99)

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: SIGNATURE REQUIRED 7-2-99 407-668-7778
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #
MICHAEL K. LONK