

# 2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N99000006507

FILED  
Jan 06, 2004  
Secretary of State

Entity Name: PASCO COUNCIL OF CHAMBERS, INC.

**Current Principal Place of Business:**

38550 5TH AVENUE  
ZEPHYRHILLS, FL 33540

**New Principal Place of Business:**

**Current Mailing Address:**

38550 5TH AVENUE  
ZEPHYRHILLS, FL 33540

**New Mailing Address:**

FEI Number: 59-3646110

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

MCDUFFIE, W. CLIFF  
6130 17TH STREET  
ZEPHYRHILLS, FL 33540 US

**Name and Address of New Registered Agent:**

MCDUFFIE, W. CLIFF  
6130 17TH STREET  
ZEPHYRHILLS, FL 33542 US

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:

01/06/2004

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: D ( ) Delete  
Name: MCDUFFIE, W C  
Address: 6130 17TH ST  
City-St-Zip: ZEPHYRHILLS, FL 33540

Title: D ( ) Delete  
Name: SMITH, PHYLLIS S  
Address: 14112 8TH ST  
City-St-Zip: DADE CITY, FL 33525

Title: D ( ) Delete  
Name: DUNKLEY, KATHY  
Address: 6221 LAND O' LAKES BLVD  
City-St-Zip: LAND O LAKES, FL 34639

Title: D ( ) Delete  
Name: ALPINE, JOE  
Address: 5443 MAIN ST  
City-St-Zip: NEW PORT RICHEY, FL 34652

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: D (X) Change ( ) Addition  
Name: MCDUFFIE, W C  
Address: 6130 17TH ST  
City-St-Zip: ZEPHYRHILLS, FL 33542

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: W. CLIFF MCDUFFIE

D

01/06/2004

Electronic Signature of Signing Officer or Director

Date