

**2013 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 717758

**Entity Name:** SANFORD CHAMBER OF COMMERCE, INC.

**Current Principal Place of Business:**

400 EAST FIRST STREET  
SANFORD, FL 32771

**Current Mailing Address:**

400 EAST FIRST STREET  
SANFORD, FL 32771 US

**FEI Number: 59-0440968**

**Certificate of Status Desired: No**

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

CZOPP, PAM  
400 EAST FIRST STREET  
SANFORD, FL 32771 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:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**Officer/Director Detail :**

Title C  
Name COENSON, BARBARA  
Address 1301 S. INTERNATIONAL PKWY, STE. 1041  
City-State-Zip: LAKE MARY FL 32745

Title VC  
Name CARAWAY, MICHAEL  
Address 250 INTERNATIONAL PKWY, STE. 108  
City-State-Zip: LAKE MARY FL 32746

Title S  
Name CZOPP, PAM  
Address 400 EAST FIRST STREET  
City-State-Zip: SANFORD FL 32771

Title T  
Name BARTH, SEAN  
Address 4055 ST. JOHN'S PARKWAY  
City-State-Zip: SANFORD FL 32771

Title PC  
Name LYON, LEIGH ANN  
Address 201 S. PARK AVE  
City-State-Zip: SANFORD FL 32771

*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: BARBARA COENSON**

**C**

**02/04/2013**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date