

2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 722933

FILED
Apr 09, 2012
Secretary of State

Entity Name: CARRABELLE AREA CHAMBER OF COMMERCE, INC.

Current Principal Place of Business:

105 ST JAMES AVE
SUITE 8
CARRABELLE, FL 32322

New Principal Place of Business:

Current Mailing Address:

P.O. DRAWER DD
CARRABELLE, FL 32322

New Mailing Address:

FEI Number: 59-3447315

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ZIMMERMAN, SUZANNE
105 ST JAMES AVE
STE 8
CARRABELLE, FL 32322 US

Name and Address of New Registered Agent:

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:

Title: DP
Name: HAUSER, SHEILA
Address: PO BOX 1221
City-St-Zip: LANARK VILLAGE, FL 32323

Title: DS
Name: NOVARIA, CHAR
Address: PO BOX 594
City-St-Zip: CARRABELLE, FL 32322

Title: D
Name: COX, LESLEY
Address: PO BOX CC
City-St-Zip: CARRABELLE, FL 32322

Title: T
Name: MARXSEN, PAUL
Address: PO BOX 629
City-St-Zip: CARRABELLE, FL 32322

Title: D
Name: BUTLER, DAVID
Address: PO BOX GG
City-St-Zip: CARRABELLE, FL 32322

Title: DVP
Name: KILGORE, AMY
Address: 288 BAYWOOD DR
City-St-Zip: CARRABELLE, FL 32322

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: SUZANNE ZIMMERMAN

EXEC

04/09/2012

Electronic Signature of Signing Officer or Director

Date