## FILE NOW: FILING FEE IS \$61.25

**NONPROFIT** CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS

1996 DOCUMENT #
1. Corporation Name

732246

(4)

SANTA RUSE COUNTY CHAMBER OF COMMERCE, INC.				
Principal Place	of Business	Mailing Address		
5247 STEWART ST 5247 STEW/ MILTON FL 32570-4737 MILTON FL		5247 STEWART ST MILTON FL 32570-4737 US		
US		US		3. Date Incorporated or Qualified 3a. Date of Last Report 05/23/1995
	ace of Business	2a. Mailing Address		4. FEI Number Applied For 59-0730134 Not Applicable
Suite, Apt.	# etc.	Suite, Apt. #, etc.		\$8.75 Additional
22		27		Certificate of Status Desired
City & State		City & State		6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees
Zip	Country	Zip	Country	8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes Yes No
24	25   9. Name and Address of Currer	29 29 Agent	30	Florida Statutes L Yes K No  10. Name and Address of New Registered Agent
81 Name				
MADTIN	WAITED D		Bu	rden, Jerry E. et Address (P.O. Box Number is Not Acceptable)
MARTIN, WALTER R 6301 WARBLER LANE				09 Heatherwood Way
MILTON FL 32570				
MILION	1 2 02010		84 City	■ 85 Zip Code
	_		هٔ ۱ ا	ce FL    32571
11. Pursuant to the provisions of Sections e17.0502 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, Buch change was arithorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the originations of, Section 617.0503. Florida Statutes.				
02/01/06				
Signature, typed or printed name of regulared agent of title if applicable. (NOTE: Registered Agent agenture required when reinstalling)  DATE  DATE				
12.	, · · · · · · · · · · · · · · · · · · ·	D DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	DT	<b>□X</b> DELETE	1.1 TITLE	DV Change 15 Addition
NAME	KOVACHICK, GENA		1.2 NAMÉ	Hunter, Fred
STREET ADDRESS	108 N STEWART ST		1.3 STREET ADDRE	
CITY-ST-ZIP	MILTON FL	FIDELEX	1.4 CITY-ST-ZIP	Milton, FL 32583
TITLE	D	<b>XX</b> DELETE	2.1 TITLE	
NAME	BROCKWAY, LARRY		2.2 NAME	Darby, Renate
STREET ADDRESS	1311 GREENLEAF DRIVE		2.3 STREET ADDRE	
CITY-ST-ZIP	MILTON FL	*XDELETE	2. 4 CITY-ST-ZIP 3.1 TITLE	Milton, FL 32570  DS □ Change
TITLE NAME	DS BOWDEN, VICKI	ABOLLEN	3.2 NAME	Buckman, Sam
STREET ADDRESS	7601 SCENIC HWY		3.3 STREET ADDRE	
CITY-ST-ZIP	PENSACOLA FL		34. CITY-ST-ZIP	Milton, FL 32570
TITLE	DV	DELETE	4.1 TITLE	DP **Change Addition
NAME	BURDEN, JERRY		4. 2 NAME	Burden, Jerry E.
STREET ADDRESS	4609 HEATHERWOOD WAY		4.3 STREET ADDRE	1
CITY-ST-ZIP	PACE FL		4.4 CITY-ST-ZIP	Pace, FL 32571
TITLE	DP	DELETE	5.1 TITLE	D £ Change Addition
NAME	MARTIN, MARTY		5.2 NAME	Martin, Marty
STREET ADDRESS	6301 WARBLER LANE		5.3 STREET ADDRE	SS 6301 Warbler Lane
CITY-ST-ZIP	MILTON FL		5.4 CITY - ST - ZIP	Milton, FL 32570
TITLE	D	<b>€</b> DELETE	6.1 TITLE	DV ☐ Change ☑ Addition
NAME	THAMES, BARBARA		6.2 NAME	Bedics, Richard
STREET ADDRESS	142 CARLYN DRIVE		6.3 STREET ADDRE	open and a second
CITY-ST-ZIP	PACE FL		64 City-ST-ZiP	Milton, Florida 32583-1798
14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k). Florida Statutes. I further certify that the information indicated on this annual report is true and accurate and that my signature shall have the same legal effect as if made under cath; 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.				

SIGNATURE:

Burden

TO OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

02/01/96

904 623-3846 Dayt me Phone #

CR2E037 (12/95)