

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000001429

FILED
Jan 06, 2009
Secretary of State

Entity Name: CHAMBER OF COMMERCE OF IMMOKALEE, INC.

Current Principal Place of Business:

310 ALACHUA ST.
IMMOKALEE, FL 34142

New Principal Place of Business:

1300 N. 15TH STREET
SUITE 2
IMMOKALEE, FL 34142

Current Mailing Address:

5278
IMMOKALEE, FL 34143

New Mailing Address:

P.O. BOX 5278
IMMOKALEE, FL 34143

FEI Number: 16-1692187

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

RICE, RICHARD
310 ALACHUA ST
IMMOKALEE, FL 34142 US

Name and Address of New Registered Agent:

RICE, RICHARD
1300 N 15TH STREET - SUITE 2
IMMOKALEE, FL 34142 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:

01/06/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: GOODNIGHT, ANNE
Address: 425 FIRST ST
City-St-Zip: IMMOKALEE, FL 34142

Title: VP () Delete
Name: SERRATA, ESSIE
Address: 1800 FARM WORKER WAY
City-St-Zip: IMMOKALEE, FL 34142

Title: D () Delete
Name: DEYO, EVA
Address: 1020 SOLITATION RD
City-St-Zip: IMMOKALEE, FL 34142

Title: T () Delete
Name: PUENTR, SILVIA
Address: 417 N 1ST ST
City-St-Zip: IMMOKALEE, FL 34142

Title: S () Delete
Name: RICE, RICHARD
Address: 1300 N 15TH ST STE 2
City-St-Zip: IMMOKALEE, FL 34142

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: DEYO, EVA
Address: 1020 SANITATION ROAD
City-St-Zip: IMMOKALEE, FL 34142

Title: VP (X) Change () Addition
Name: LOUKONEN, EVERETT
Address: 1320 N 15TH STREET
City-St-Zip: IMMOKALEE, FL 34142

Title: D (X) Change () Addition
Name: OLESKY, EDWARD
Address: 6001 LAKE TRAFFORD ROAD
City-St-Zip: IMMOKALEE, FL 34142

Title: T (X) Change () Addition
Name: BARNHART, BERNARDO
Address: 1400 N 15TH STREET
City-St-Zip: IMMOKALEE, FL 34142

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

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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: RICHARD RICE

SEC

01/06/2009

Electronic Signature of Signing Officer or Director

Date