

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N99000003430

FILED
May 31, 2007
Secretary of State

Entity Name: LIBERTY COUNTY CHAMBER OF COMMERCE, INC.

Current Principal Place of Business:

PO BOX 523
BRISTOL, FL 32321

New Principal Place of Business:

11493 NW SUMMERS ROAD
BRISTOL, FL 32321

Current Mailing Address:

PO BOX 523
BRISTOL, FL 32321

New Mailing Address:

FEI Number: 59-2365517 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

LUNSFORD, BETTY J
19089 NW C.R. 379
BRISTOL, FL 32321 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: VP () Delete
Name: HIERS, JED
Address: P.O. BOX 552
City-St-Zip: BRISTOL, FL 32321

Title: D () Delete
Name: BROWN, RICHARD
Address: P.O. BOX 298
City-St-Zip: HOSFORD, FL 32334

Title: D () Delete
Name: SUMMERS, LESTER
Address: PO BOX 1255 N/A
City-St-Zip: BRISTOL, FL 32321

Title: ST () Delete
Name: LUNSFORD, BETTY J
Address: 19089 NW C.R. 379, PO BOX 721
City-St-Zip: BRISTOL, FL 32321

Title: P () Delete
Name: EUBANKS, JOHNNY
Address: P.O. BOX 536
City-St-Zip: BRISTOL, FL 32321

Title: D () Delete
Name: RICHARDS, GARY
Address: P.O. BOX 850
City-St-Zip: BRISTOL, FL 32321

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: VP (X) Change () Addition
Name: HIERS, JED
Address: SUMMERS ROAD; P.O. BOX 552
City-St-Zip: BRISTOL, FL 32321

Title: D (X) Change () Addition
Name: BROWN, RICHARD JR
Address: 24608 NE FIREBREAK 21 ROAD
City-St-Zip: HOSFORD, FL 32334

Title: D (X) Change () Addition
Name: WILLIS, MITCH
Address: 10898 NW SR 20
City-St-Zip: BRISTOL, FL 32321

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

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

Title: D (X) Change () Addition
Name: PLUMMER, MARK S
Address: 16059 NW LAKESIDE RD., LAKE MYSTIC
City-St-Zip: BRISTOL, FL 32321

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: BETTY J. LUNSFORD

ST

05/31/2007

Electronic Signature of Signing Officer or Director

Date