

2018 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 745120

Entity Name: CRESTVIEW AREA CHAMBER OF COMMERCE,
INCORPORATED**Current Principal Place of Business:**1447 COMMERCE DRIVE
CRESTVIEW, FL 32539**Current Mailing Address:**1447 COMMERCE DRIVE
CRESTVIEW, FL 32539**FEI Number: 59-0785307****Certificate of Status Desired: No****Name and Address of Current Registered Agent:**SHAW, CRAIG
1447 COMMERCE DRIVE
CRESTVIEW, FL., FL 32539 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: CRAIG SHAW****02/16/2018**

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title PAST CHAIRMAN
Name MANN, DAWN
Address 1447 COMMERCE DRIVE
City-State-Zip: CRESTVIEW FL 32539

Title CHAIRMAN
Name CADENHEAD, CHRISTIE
Address 1447 COMMERCE DRIVE
City-State-Zip: CRESTVIEW FL 32539

Title TREASURER
Name SHAW, CRAIG
Address 1447 COMMERCE DRIVE
City-State-Zip: CRESTVIEW FL 32539

Title PRESIDENT EMERITUS
Name MOODY, TOM
Address 1447 COMMERCE DR
City-State-Zip: CRESTVIEW FL 32539

Title VC
Name SMITH, RITA
Address 1447 COMMERCE DRIVE
City-State-Zip: CRESTVIEW FL 32539

Title VC
Name COMPTON, SHERRELL
Address 1447 COMMERCE DRIVE
City-State-Zip: CRESTVIEW FL 32539

Title INCOMING CHAIRMAN
Name HELT, ROBYN
Address 1447 COMMERCE DRIVE
City-State-Zip: CRESTVIEW FL 32539

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: CHRISTIE CADENHEAD**CHAIRMAN****02/16/2018**

Electronic Signature of Signing Officer/Director Detail

Date