2019 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 06, 2019
Secretary of State
7764724508CC

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Entity Name: GREATER CHIEFLAND AREA CHAMBER OF COMMERCE, INC.

Current Principal Place of Business:

23 SE 2ND AVE
CHIEFLAND, FL 32626

Current Mailing Address:

PO BOX 1397
CHIEFLAND, FL 32644 US

FEI Number: 59-2458568

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

BEAUCHAMP, ROBERT
105 E PARK AVE
CHIEFLAND, FL 32626 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:

Electronic Signature of Registered Agent — Date

Officer/Director Detail :

Title	ED
Name	PARKER, JOY L
Address	23 SE 2ND AVE
City-State-Zip:	CHIEFLAND FL 32626

Title	DIRECTOR
Name	ALLEN, BILLIE JO
Address	PO BOX 1281
City-State-Zip:	CHIEFLAND FL 32644

Title	PRESIDENT
Name	PATTERSON, BENNITT
Address	PO BOX 1027
City-State-Zip:	CHIEFLAND FL 32644

Title	DIRECTOR
Name	GEORGE, DENNY
Address	729 E. WADE STREET
City-State-Zip:	TRENTON FL 32693

Title	PAST PRESIDENT
Name	WATSON, RYAN
Address	11491 NW 50TH AVE
City-State-Zip:	CHIEFLAND FL 32626

Title	VP
Name	MAINWARING, RISSA
Address	2153 NW 11TH DRIVE
City-State-Zip:	CHIEFLAND FL 32626

Title	DIRECTOR
Name	SPANN, PRENTICE
Address	16051 NW 30 AVENUE
City-State-Zip:	TRENTON FL 32693

Title	TREASURER
Name	HOPKINS, CARA
Address	2012 N. YOUNG BLVD
City-State-Zip:	CHIEFLAND FL 32626

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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: JOY PARKER ED 03/06/2019

Electronic Signature of Signing Officer/Director Detail — Date

Officer/Director Detail Continued :

Title	DIRECTOR
Name	ALLEN, NATASHA
Address	17456 NW HWY 19
City-State-Zip:	FANNING SPRINGS FL 32693

Title	DIRECTOR
Name	LOTT, BEN
Address	1627 N. YOUNG BLVD
City-State-Zip:	CHIEFLAND FL 32626

Title	DIRECTOR
Name	DALE , BOWEN
Address	624 W PARK AVE
City-State-Zip:	CHIEFLAND FL 32626

Title	DIRECTOR
Name	DURDEN, RANDY
Address	1424 N YOUNG BLVD
City-State-Zip:	CHIEFLAND FL 32626

Title	DIRECTOR
Name	SKELLY, KRYSTLE
Address	15390 US HWY 19
City-State-Zip:	CHIEFLAND FL 32626