

**2018 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N01000007495

**Entity Name:** AMELIA ISLAND-FERNANDINA BEACH-YULEE CHAMBER OF COMMERCE, INC.

**FILED**  
**Mar 13, 2018**  
**Secretary of State**  
**CC5800530991**

**Current Principal Place of Business:**

961687 GATEWAY BLVD  
SUITE 101G  
FERNANDINA BEACH, FL 32034

**Current Mailing Address:**

961687 GATEWAY BLVD  
SUITE 101G  
FERNANDINA BEACH, FL 32034

**FEI Number: 59-0717156**

**Certificate of Status Desired: No**

**Name and Address of Current Registered Agent:**

DUNCAN, REGINA M  
961687 GATEWAY BLVD  
SUITE 101G  
FERNANDINA BEACH, FL 32034 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 PMS  
Name DUNCAN, REGINA M  
Address 961687 GATEWAY BLVD STE. 101G  
City-State-Zip: FERNANDINA BEACH FL 32034

Title IMMEDIATE PAST CHAIRMAN  
Name LEVITT, JONATHAN  
Address 961687 GATEWAY BLVD  
SUITE 101G  
City-State-Zip: FERNANDINA BEACH FL 32034

Title TREASURER  
Name WESLEY, HURLOCK  
Address 961687 GATEWAY BLVD  
SUITE 101G  
City-State-Zip: FERNANDINA BEACH FL 32034

Title CHAIRMAN  
Name HARTMAN, BOB  
Address 961687 GATEWAY BLVD  
SUITE 101G  
City-State-Zip: FERNANDINA BEACH FL 32034

Title CHAIRMAN, ELECT  
Name RAMIRO, SICRE  
Address 961687 GATEWAY BLVD  
SUITE 101G  
City-State-Zip: FERNANDINA BEACH FL 32034

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: REGINA DUNCAN**

**PRESIDENT**

**03/13/2018**

Electronic Signature of Signing Officer/Director Detail

Date