2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 19, 2009
Secretary of State

DOCUMENT# 702967

Entity Name: GREATER PINE ISLAND CHAMBER OF COMMERCE,INC

Current Principal Place of Business:

3640 PINE ISLAND ROAD
MATLACHA, FL 33993

New Principal Place of Business:

Current Mailing Address:

PO BOX 525
MATLACHA, FL 33993

New Mailing Address:

FEI Number: 59-0995723 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

BENTON, LISA
3563 RUBY AVE
SAINT JAMES CITY, FL 33956 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:	PD	( ) Delete
Name:	WELCH, CYNTHIA W	
Address:	3777 MANGO STREET	
City-St-Zip:	ST. JAMES CITY, FL 33956	
Title:	VD	( ) Delete
Name:	RUSCIK, DONNA J	
Address:	7840 LOBEAN LANE	
City-St-Zip:	BOKEELIA, FL 33922	
Title:	VD	( ) Delete
Name:	JACKSON, ADAM	
Address:	4200 PINE ISLAND ROAD	
City-St-Zip:	MATLACHA, FL 33993	
Title:	SD	( ) Delete
Name:	JENNINGS, JENNIFER	
Address:	10451 TROTWOOD AVE	
City-St-Zip:	ST. JAMES CITY, FL 33956	
Title:	TD	( ) Delete
Name:	JOHNSON, JAY R	
Address:	2258 DIXIE LEE COURT	
City-St-Zip:	SAINT JAMES CITY, FL 33956	
Title:	D	( ) Delete
Name:	CLARY, RAY	
Address:	4213 NW 11TH TERRACE	
City-St-Zip:	CAPE CORAL, FL 33993	

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title:	PD	(X) Change ( ) Addition
Name:	RUSCIK, DONNA J	
Address:	7840 LOBEAN LANE	
City-St-Zip:	BOKEELIA, FL 33922	
Title:	VD	(X) Change ( ) Addition
Name:	JACKSON, ADAM	
Address:	4200 PINE ISLAND ROAD	
City-St-Zip:	MATLACHA, FL 33993	
Title:	VD	(X) Change ( ) Addition
Name:	CLARY, RAY	
Address:	4213 NW 11TH TERRACE	
City-St-Zip:	CAPE CORAL, FL 33993	
Title:	SD	(X) Change ( ) Addition
Name:	WOITKOWSKI, ROBERT	
Address:	827 SW 29TH TERRACE	
City-St-Zip:	CAPE CORAL, FL 33914	
Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:	D	(X) Change ( ) Addition
Name:	CLEAVER, TOM	
Address:	5326 MARTIN COVE	
City-St-Zip:	BOKEELIA, FL 33922	

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: LISA BENTON EX D 03/19/2009

Electronic Signature of Signing Officer or Director — Date