2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 704374

FILED Jan 08, 2008 Secretary of State

Entity Name: CLAY COUNTY CHAMBER OF COMMERCE, INC.

US

Current Principal Place of Business: New Principal Place of Business:

1734 KINGSLEY AVENUE ORANGE PARK, FL 32073

Current Mailing Address: New Mailing Address:

1734 KINGSLEY AVENUE ORANGE PARK, FL 32073 US

FEI Number: 59-0549602 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

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

KILBERG, KELLIE JO 1734 KINGSLEY AVENUE ORANGE PARK, FL 32073 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

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: T () Delete Title: T (X) Change () Addition Name: SMITH, THERESA Name: COLEMAN, RONALD

Address: 1301 RIVERPLACE BLVD. TOWER STE 500 Address: 577 GOLDEN LINKS DRIVE
City-St-Zip: JACKSONVILLE, FL 32207 US City-St-Zip: ORANGE PARK, FL 32073 US

Title: P () Delete Title: () Change () Addition

 Name:
 KILBERG, KELLIE JO
 Name:

 Address:
 1734 KINGSLEY AVENUE
 Address:

 City-St-Zip:
 ORANGE PARK, FL 32073 US
 City-St-Zip:

Title: C () Delete Title: C (X) Change () Addition Name: MCGOWAN, TED Name: MOOREHEAD, GREGORY

Address: PO BOX 477 Address: 485 BLANDING BLVD
City-St-Zip: GREEN COVE SPRINGS, FL 32043 US City-St-Zip: ORANGE PARK, FL 32073 US

Title: V () Delete Title: V (X) Change () Addition

Name: MOOREHEAD, GREGORY Name: SMITH, THERESA

Name: MOOREHEAD, GREGORY Name: SMITH, THERESA
Address: 485 BLANDING BLVD Address: 1301 RIVERPLACE BLVD, SUITE 500
City-St-Zip: ORANGE PARK, FL 32073 US City-St-Zip: JACKSONVILLE, FL 32207 US

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: KELLIE JO KILBERG P 01/08/2008