2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
May 19, 2009
Secretary of State

DOCUMENT# 706191

Entity Name: GADSDEN COUNTY CHAMBER OF COMMERCE, INC.

Current Principal Place of Business:

208 N ADAMS ST
QUINCY, FL 32351

New Principal Place of Business:

Current Mailing Address:

208 N ADAMS ST
QUINCY, FL 32351

New Mailing Address:

FEI Number: 59-0558449 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

GARDNER, DAVID
208 NORTH ADAMS STREET
QUINCY, FL 32351 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: D ( ) Delete
Name: HOLCOMB, FRANK
Address: 107 W FRANKLIN ST
City-St-Zip: QUINCY, FL 32351

Title: D ( ) Delete
Name: MCPHERSON, WALTER
Address: 4 E WASHINGTON ST
City-St-Zip: QUINCY, FL 32351

Title: D ( ) Delete
Name: BRADWELL, MONTE
Address: 18300 BLUE STAR HWY
City-St-Zip: QUINCY, FL 32351

Title: ED ( ) Delete
Name: GARDNER, DAVID
Address: 208 N ADAMS ST
City-St-Zip: QUINCY, FL 32351

Title: ( ) Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: D (X) Change ( ) Addition
Name: MCKINNON, HOWARD
Address: 711 N MAIN ST
City-St-Zip: HAVANA, FL 32333

Title: D (X) Change ( ) Addition
Name: BROWN, CHARLIE
Address: 545 RIVER BIRCH RD
City-St-Zip: MIDWAY, FL 32343

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: D ( ) Change (X) Addition
Name: MCPHERSON, WALTER
Address: 4 E WASHINGTON ST
City-St-Zip: QUINCY, FL 32351

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: DAVID GARDNER ED 05/19/2009

Electronic Signature of Signing Officer or Director — Date