

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 712487

FILED
Jan 29, 2009
Secretary of State

Entity Name: LAKE CITY, COLUMBIA COUNTY CHAMBER OF COMMERCE, INC.

Current Principal Place of Business:

162 S MARION AVE
LAKE CITY, FL 320254354 US

New Principal Place of Business:

Current Mailing Address:

162 S MARION AVE
LAKE CITY, FL 320254354 US

New Mailing Address:

FEI Number: 59-0323804

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

POOLE, JIM
162 S MARION AVENUE
LAKE CITY, FL 32025 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: JONES, GEORGIA
Address: 4705 US HIGHWAY 90 W
City-St-Zip: LAKE CITY, FL 32055

Title: TD () Delete
Name: BULLARD, CHRIS
Address: 212 N. MARION AVE. #202
City-St-Zip: LAKE CITY, FL 32055

Title: ED () Delete
Name: POOLE, JIM
Address: 106 SOUTH MARION STREET
City-St-Zip: LAKE CITY, FL 32025

Title: D () Delete
Name: DAMPIER, CHRIS
Address: 350 SW MAIN BLVD
City-St-Zip: LAKE CITY, FL 32025

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: BULLARD, CHRIS
Address: 212 N MARION AVE #202
City-St-Zip: LAKE CITY, FL 32025

Title: PE (X) Change () Addition
Name: DAMPIER, CHRIS
Address: 162 S MARION AVE
City-St-Zip: LAKE CITY, FL 32025

Title: ED (X) Change () Addition
Name: POOLE, JIM
Address: 162 S MARION AVE
City-St-Zip: LAKE CITY, FL 32025

Title: T (X) Change () Addition
Name: SCAFF-DRAWDY, JENNY
Address: 134 SE COLBURN AVE
City-St-Zip: LAKE CITY, FL 32025

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: JIM POOLE

ED

01/29/2009

Electronic Signature of Signing Officer or Director

Date