

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 714220

FILED
Apr 10, 2007
Secretary of State

Entity Name: FLORIDA CHAMBER OF COMMERCE FOUNDATION, INC.

Current Principal Place of Business:

136 S BRONOUGH ST
TALLAHASSEE, FL 323017706

New Principal Place of Business:

Current Mailing Address:

P. O. BOX 11309
TALLAHASSEE, FL 323023309 US

New Mailing Address:

FEI Number: 59-6209605

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

YOUNG, ROY C
225 S ADAMS STREET
TALLAHASSEE, FL 32301 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: P () Delete
Name: RYLL, FRANK M JR.
Address: 136 S. BRONOUGH ST
City-St-Zip: TALLAHASSEE, FL 32301

Title: EVP (X) Delete
Name: CASSELS, LEON H
Address: 136 S. BRONOUGH ST.
City-St-Zip: TALLAHASSEE, FL 32301

Title: T () Delete
Name: CASSELS, LEON H
Address: 136 S. BRONOUGH ST.
City-St-Zip: TALLAHASSEE, FL 32301

Title: D () Delete
Name: ZUMWALT, JOHN B
Address: 5300 W CYPRESS ST. STE 300
City-St-Zip: TAMPA, FL 33607

Title: D () Delete
Name: HELMS, ROBERT W
Address: 225 WATER STREET, 11TH FLOOR
City-St-Zip: JACKSONVILLE, FL 32202

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

Title: D (X) Change () Addition
Name: HUDSON, ROBERT C
Address: 5221 N.W. 119TH STREET
City-St-Zip: GAINESVILLE, FL 32653 36

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

I hereby certify that the information supplied with this filing does not qualify for the 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: LHC

T

04/10/2007

Electronic Signature of Signing Officer or Director

Date