

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 716188

FILED
Jan 11, 2008
Secretary of State

Entity Name: THE LEESBURG AREA CHAMBER OF COMMERCE, INC.

Current Principal Place of Business:

103 SOUTH SIXTH STREET
LEESBURG, FL 34748 US

New Principal Place of Business:

Current Mailing Address:

P.O BOX 490309
LEESBURG, FL 347490309 US

New Mailing Address:

FEI Number: 59-0330175

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ZACHARCHUK, JAN K
103 SOUTH SIXTH STREET
LEESBURG, FL 34748 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: JOHNSON, ROBERT
Address: P.O BOX 255
City-St-Zip: MOUNT DORA, FL 32756

Title: TD () Delete
Name: GRIFFIN, SHIRLEY
Address: 800 W. NORTH BLVD
City-St-Zip: LEESBURG, FL 34748

Title: PPD () Delete
Name: WALLACE, RON
Address: 212 E. MAIN STREET
City-St-Zip: LEESBURG, FL 34748

Title: PED () Delete
Name: PIERSON, TIM
Address: 1211 W. NORTH BLVD
City-St-Zip: LEESBURG, FL 34748

Title: VP () Delete
Name: ZACHARCHUK, JAN
Address: 103 SOUTH SIXTH STREET
City-St-Zip: LEESBURG, FL 34748

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: PIERSON, TIM
Address: 1211 W. NORTH BLVD
City-St-Zip: LEESBURG, FL 34748

Title: TD (X) Change () Addition
Name: BONE, JR., ROBERT E.
Address: 701 WEST MAIN STREET
City-St-Zip: LEESBURG, FL 34748

Title: PPD (X) Change () Addition
Name: JOHNSON, ROBERT
Address: P.O BOX 255
City-St-Zip: MOUNT DORA, FL 32756

Title: PED (X) Change () Addition
Name: STIFFLER, STEVE
Address: 6113 SPINAKEE LOOP
City-St-Zip: LADY LAKE, FL 32159

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

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: JAN K. ZACHARCHUK

ED

01/11/2008

Electronic Signature of Signing Officer or Director

Date