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Mar 26 1997 8:00am
Secretary of StateNONPROFIT
CORPORATION
ANNUAL REPORT
1997FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 717721 (5)

1. Corporation Name

MARIANNA CHAMBER OF COMMERCE, INC.

Principal Place of Business

Mailing Address

2928 JEFFERSON ST
P.O. BOX 130
MARIANNA FL 324472928 JEFFERSON ST
P.O. BOX 130
MARIANNA FL 32447-01303. Date Incorporated or Qualified
12/10/19693a. Date of Last Report
02/07/1996

2. Principal Place of Business

2a. Mailing Address

21 2928 Jefferson Street

26 P. O. Box 130

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22 Marianna Chamber of Commerce

City & State

City & State

23 Marianna, FL 32446

28 Marianna, FL 32447

Zip

Country

Zip

Country USA

24 32446

25 Jackson

29 32447

30 Jackson

4. FEI Number
59-0344533Applied For
Not Applicable5. Certificate of Status Desired ☐ \$8.75 Additional
Fee Required6. Election Campaign Financing
Trust Fund Contribution ☐ \$5.00 May Be
Added to Fees6. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

TAYLOR, WENDELL H.
2928 JEFFERSON ST
MARIANNA FL 3244681 Name
Mrs. Pamela M. Nash, Executive Dir.

82 Street Address (P.O. Box Number is Not Acceptable)

83 2928 Jefferson Street

84

City

Marianna, FL

FL

85 Zip Code
3244611. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered
office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered
agent. I am familiar with and accept the obligations of Section 617.0503, Florida Statutes.SIGNATURE *Pamela M. Nash* PAMELA M. NASH EXEC. DIRECTOR 24 MARCH 97
(NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE D ☐ DELETE
NAME BENTON, JANE
STREET ADDRESS P.O. BOX 520
CITY - ST - ZIP MARIANNA FLTITLE D ☐ DELETE
NAME HARTSFIELD, IDUS
STREET ADDRESS 3820 CAVERNS RD
CITY - ST - ZIP MARIANNA FLTITLE D ☒ DELETE
NAME LOCKY, CHUCK
STREET ADDRESS 2864 MADISON ST
CITY - ST - ZIP MARIANNA FLTITLE D ☐ DELETE
NAME JOWERS, ED
STREET ADDRESS 4487 LAFAYETTE ST
CITY - ST - ZIP MARIANNA FLTITLE D ☐ DELETE
NAME MILTON, HOWARD
STREET ADDRESS P O BOX 836
CITY - ST - ZIP MARIANNA FLTITLE P ☒ DELETE
NAME MILLER, STEVE
STREET ADDRESS P.O. BOX 550
CITY - ST - ZIP MARIANNA FL1.1 TITLE President-Chamber/Comm. ☒ Change ☐ Addition
1.2 NAME Mrs. S. Jane Benton
1.3 STREET ADDRESS P. O. Box 130 2928 Jefferson St.
1.4 CITY - ST - ZIP Marianna, FL 324462.1 TITLE ☐ Change ☒ Addition
2.2 NAME Mrs. Pamela M. Nash, Exec. Director
2.3 STREET ADDRESS P. O. Box 130 2928 Jefferson St.
2.4 CITY - ST - ZIP Marianna, FL 324473.1 TITLE Treasurer-Chamber/Comm. ☐ Change ☒ Addition
3.2 NAME Mr. John Hamilton
3.3 STREET ADDRESS 4425 Market Street
3.4 CITY - ST - ZIP Marianna, FL 324464.1 TITLE ☐ Change ☒ Addition
4.2 NAME Mr. William Long-Vice President
4.3 STREET ADDRESS 4250 Hospital Drive
4.4 CITY - ST - ZIP Marianna, FL 324465.1 TITLE ☐ Change ☒ Addition
5.2 NAME Mr. Roger Clay-Mayor
5.3 STREET ADDRESS City of Marianna
5.4 CITY - ST - ZIP Marianna, FL 324466.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY - ST - ZIP14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the
information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address.SIGNATURE: JANE C. KRAFT *Jane C. Kraft* 3/6/97 904
282-8061

CR2E037 (9/96)