

**2009 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT**

**FILED  
Jul 30, 2009  
Secretary of State**

DOCUMENT# 717721

Entity Name: JACKSON COUNTY CHAMBER OF COMMERCE, INC.

**Current Principal Place of Business:**

JACKSON COUNTY CHAMBER OF COMMERCE  
4318 LAFAYETTE STREET  
MARIANNA, FL 32446 US

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 130  
MARIANNA, FL 32447 US

**New Mailing Address:**

FEI Number: 59-0344533      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

JACKSON COUNTY CHAMBER OF COMMERCE  
4318 LAFAYETTE STREET  
MARIANNA, FL 32446 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: PCEO ( ) Delete  
Name: KIMBROUGH, ART  
Address: 4318 LAFAYETTE ST  
City-St-Zip: MARIANNA, FL 32446

Title: PC ( ) Delete  
Name: LASSMANN, TOMMY  
Address: 2260 HIGHWAY 71  
City-St-Zip: MARIANNA, FL 32448

Title: STO ( ) Delete  
Name: BEAUCHAMP, VICKY  
Address: 4393 LAFAYETTE STREET  
City-St-Zip: MARIANNA, FL 32446

Title: C ( ) Delete  
Name: JAMIE, STREETMAN  
Address: 4999 WHITETAIL DRIVE  
City-St-Zip: MARIANNA, FL 32448

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

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

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

Title: STO (X) Change ( ) Addition  
Name: PUMPHREY, TONY  
Address: 4267 LAFAYETTE STREET  
City-St-Zip: MARIANNA, FL 32446

Title: C (X) Change ( ) Addition  
Name: STREETMAN, JAMIE  
Address: 4999 WHITETAIL DRIVE  
City-St-Zip: MARIANNA, FL 32448

Title: VC ( ) Change (X) Addition  
Name: CLEMMONS, SARAH  
Address: 3094 INDIAN CIRCLE  
City-St-Zip: MARIANNA, FL 32446

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: ART KIMBROUGH

PCEO

07/30/2009

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date