

# **2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 722227

**FILED**  
**Mar 04, 2011**  
**Secretary of State**

**Entity Name:** SUWANNEE COUNTY CHAMBER OF COMMERCE, INC.

**Current Principal Place of Business:**

816 S. OHIO AVENUE  
LIVE OAK, FL 32064 US

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX DRAWER C  
LIVE OAK, FL 32064 US

**New Mailing Address:**

**FEI Number:** 59-0562942

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

CASON, DENNIS  
816 S. OHIO AVENUE  
LIVE OAK, FL 32060 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:** D  
**Name:** BURLEY, JOHN  
**Address:** 205 WHITE AVENUE  
**City-St-Zip:** LIVE OAK, FL 32064

**Title:** C  
**Name:** SCOTT, BARBIE  
**Address:** 816 S OHIO AVE  
**City-St-Zip:** LIVE OAK, FL 32064

**Title:** T  
**Name:** JOHNSON, AMY  
**Address:** PO BOX 429  
**City-St-Zip:** LIVE OAK, FL 32064

I hereby 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 all other like empowered.

**SIGNATURE:** JOHN BURLEY

D

03/04/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date