

# 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Apr 18, 2005 8:00 am**  
**Secretary of State**

04-18-2005 90306 043 \*\*\*\*61.25

**DOCUMENT # 738725**

1. Entity Name  
**WITHLACOOCHEE-GULF AREA CHAMBER OF  
COMMERCE, INC.**



Principal Place of Business  
**167 W HIGHWAY 40  
P O BOX 427  
INGLIS, FL 34449 US**

Mailing Address  
**P.O. BOX 427  
INGLIS, FL 34449 US**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

02032005 Chg-NP CR2E037 (10/03)

4. FEI Number  
**59-1873186**

Applied For  
Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional  
Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**LANGLEY, PETER III  
297 COURT STREET  
BRONSON, FL 32621**

Name

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

City

**FL**

Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable: (NOTE: Registered Agent signature required when reinstating)

DATE

**Filing Fee is \$61.25  
Due by May 1, 2005**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00 May Be  
Added to Fees**

**Make check payable to  
Florida Department of State**

10. OFFICERS AND DIRECTORS

TITLE **PE** ☐ Delete  
NAME **WALTERS, RODNEY**  
STREET ADDRESS **6302 RIVERSIDE DR**  
CITY-ST-ZIP **YANKEETOWN, FL 34498**

TITLE **SD** ☒ Delete  
NAME **TOWNSEND, JOAN**  
STREET ADDRESS **41 CATTAIL CREEK**  
CITY-ST-ZIP **YANKEETOWN, FL 34498**

TITLE **TD** ☐ Delete  
NAME **WALTERS, KAY**  
STREET ADDRESS **PO BOX 5**  
CITY-ST-ZIP **YANKEETOWN, FL 34498**

TITLE **P** ☐ Delete  
NAME **FLEMING, GAIL**  
STREET ADDRESS **6202 RIVERSIDE DRIVE**  
CITY-ST-ZIP **YANKEETOWN, FL 34498**

TITLE **D** ☐ Delete  
NAME **ROACH, SUE**  
STREET ADDRESS **5415 RIVERSIDE DR**  
CITY-ST-ZIP **YANKEETOWN, FL 34449**

TITLE **D** ☐ Delete  
NAME **LEFILES, RICK**  
STREET ADDRESS **6115 RIVERSIDE DR.**  
CITY-ST-ZIP **YANKEETOWN, FL 34498**

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE **P** ☒ Change ☐ Addition  
NAME **WALTERS, RODNEY**  
STREET ADDRESS **6302 RIVERSIDE DR**  
CITY-ST-ZIP **YANKEETOWN, FL 34498**

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE **PP** ☒ Change ☐ Addition  
NAME **SAME**  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

12. I 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE

*W. Walters, Treasurer 4/15/05*