

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 745934

FILED  
Jun 15, 2009  
Secretary of State

**Entity Name:** ANNA MARIA ISLAND CHAMBER OF COMMERCE, INC.

**Current Principal Place of Business:**

5313 GULF DRIVE  
HOLMES BEACH, FL 34217 US

**New Principal Place of Business:**

**Current Mailing Address:**

5313 GULF DRIVE  
HOLMES BEACH, FL 34217 US

**New Mailing Address:**

**FEI Number:** 59-2297522 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**  
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

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

BROCKMAN, MARYANN  
1120 78TH STREET NW  
BRADENTON, FL 34209 US

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

BROCKMAN, MARYANN  
507 59TH ST.  
HOLMES BEACH, FL 34217 US

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:

06/15/2009

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: P ( ) Delete  
Name: BROCKMAN, MARYANN  
Address: 1120 78TH STREET N.W.  
City-St-Zip: BRADENTON, FL 34209

Title: COB ( ) Delete  
Name: DAVIS, MARK  
Address: 521 69TH ST  
City-St-Zip: HOLMES BEACH, FL 34217

Title: S ( ) Delete  
Name: MURPHY, BARBARA  
Address: 127 HAMMOCK  
City-St-Zip: ANNA MARIA, FL 34216

Title: T ( ) Delete  
Name: LAPENSEE, KAREN  
Address: PO BOX 614  
City-St-Zip: ANNA MARIA, FL 34216

Title: COBE ( ) Delete  
Name: THOMPSON, CINDY  
Address: 703 88TH ST N.W.  
City-St-Zip: BRADENTON, FL 34209

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

Title: P (X) Change ( ) Addition  
Name: BROCKMAN, MARYANN  
Address: 507 59TH ST.  
City-St-Zip: HOLMES BEACH, FL 34217

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

Title: S (X) Change ( ) Addition  
Name: LA PENSEE, KAREN  
Address: 127 HAMMOCK  
City-St-Zip: ANNA MARIA, FL 34216

Title: T (X) Change ( ) Addition  
Name: GIFT, LOIS  
Address: PO BOX 614  
City-St-Zip: ANNA MARIA, FL 34216

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: MARY ANN BROCKMAN

P

06/15/2009

Electronic Signature of Signing Officer or Director

Date