

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 752100

FILED
Apr 26, 2004
Secretary of State

Entity Name: LAFAYETTE COUNTY CHAMBER OF COMMERCE, INC.

Current Principal Place of Business:

COUNTY COURTHOUSE CORNER HWY 27 + 51
P.O.BOX 416
MAYO, FL 32066

New Principal Place of Business:

Current Mailing Address:

COUNTY COURTHOUSE CORNER HWY 27 + 51
P.O.BOX 416
MAYO, FL 32066

New Mailing Address:

FEI Number: 59-1998442

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MCMILLAN, LEENETTE W
124 NORTH FLETCHER AVENUE
MAYO, FL 32066 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 () Delete
Name: HOLLIS, CHERYL
Address: ROUTE 2, BOX 635
City-St-Zip: MAYO, FL 32066

Title: TD () Delete
Name: MCMILLAN, LEENETTE
Address: P.O. BOX 1388, CRAWFORD STREET
City-St-Zip: MAYO, FL 32066

Title: D () Delete
Name: JOHNSON, VI
Address: PO BOX 696
City-St-Zip: MAYO, FL 32066

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: HOLLIS, CHERYL
Address: 363 NE RIVER ROAD
City-St-Zip: MAYO, FL 32066

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

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

I hereby certify that the information supplied with this filing does not qualify for the 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 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: CHERYL HOLLIS

PRES

04/26/2004

Electronic Signature of Signing Officer or Director

Date