

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 752697

FILED  
Apr 21, 2009  
Secretary of State

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

**Current Principal Place of Business:**

20 E. MACCLENNEY AVE.  
MACCLENNEY, FL 32063

**New Principal Place of Business:**

**Current Mailing Address:**

20 E. MACCLENNEY AVE.  
MACCLENNEY, FL 32063

**New Mailing Address:**

**FEI Number:** 59-2076369

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

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

REGISTER, DARRYL  
20 E. MACCLENNEY AVE.  
MACCLENNEY, FL 32063 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: TD ( ) Delete  
Name: DRIGGERS, PEGGY MS  
Address: P O BOX 820  
City-St-Zip: GLEN SAINT MARY, FL 32040 US

Title: VD ( ) Delete  
Name: ROBINSON, JACKIE  
Address: 1168 S. SIXTH ST.  
City-St-Zip: MACCLENNEY, FL 32063 US

Title: PD ( ) Delete  
Name: TODD, FERREIRA V  
Address: 250 N. LOVODER ST  
City-St-Zip: MACCLENNEY, FL 32063 US

Title: ED ( ) Delete  
Name: REGISTER, DARRYL  
Address: 20 E MACCLENNEY AVE  
City-St-Zip: MACCLENNEY, FL 32063

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

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

Title: PD (X) Change ( ) Addition  
Name: ROBINSON, JACKIE  
Address: 1168 S. SIXTH ST.  
City-St-Zip: MACCLENNEY, FL 32063 US

Title: VD (X) Change ( ) Addition  
Name: STEELE, BOBBY  
Address: 2686 COMMERCE RD  
City-St-Zip: MACCLENNEY, FL 32063 US

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: DARRYL REGISTER

ED

04/21/2009

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

\_\_\_\_\_  
Date