## 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**DOCUMENT#758810** 

FILED Jan 06, 2009 Secretary of State

Entity Name: AUBURNDALE CHAMBER OF COMMERCE, INC.

Current Principal Place of Business: New Principal Place of Business:

111 EAST PARK STREET 109 MAIN STREET

AUBURNDALE, FL 33823 AUBURNDALE, FL 33823

Current Mailing Address: New Mailing Address:

111 EAST PARK STREET 109 MAIN STREET

AUBURNDALE, FL 33823 AUBURNDALE, FL 33823

FEI Number: 59-0672326 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

PRUITT, JOY PRUITT, JOY A DIR.
111 EAST PARK ST. 109 MAIN STREET

AUBURNDALE, FL 33823 US AUBURNDALE, FL 33823 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: JOY PRUITT 01/06/2009

Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRES ( ) Delete Title: DIR (X) Change ( ) Addition

 Name:
 THOMAS, JOEL
 Name:
 PRUITT, JOY

 Address:
 111 EAST PARK STREET
 Address:
 109 MAIN STREET

 City-St-Zip:
 AUBURNDALE, FL 33823
 City-St-Zip:
 AUBURNDALE, FL 33823

Title: PE ( ) Delete Title: PRES (X) Change ( ) Addition Name: GOVONI, BRIAN Name: GOVONI, BRIAN

Address: 111 E PARK ST Address: 109 MAIN STREET
City-St-Zip: AUBURNDALE, FL 33823 City-St-Zip: AUBURNDALE, FL 33823

Title: ( ) Delete Title: PE ( ) Change (X) Addition

 Name:
 Name:
 YATES, BRIAN

 Address:
 Address:
 109 MAIN STREET

 City-St-Zip:
 City-St-Zip:
 AUBURNDALE, FL 33823

Title: ( ) Delete Title: PP ( ) Change (X) Addition

 Name:
 Name:
 THOMAS, JOEL

 Address:
 Address:
 109 MAIN STREET

 City-St-Zip:
 City-St-Zip:
 AUBURNDALE, FL 33823

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: JOY PRUITT DIR 01/06/2009

Electronic Signature of Signing Officer or Director

Date