2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 762681

FILED Jan 03, 2006 Secretary of State

Entity Name: PENSACOLA AREA CHAMBER FOUNDATION, INC.

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

P.O.BOX 550 117 W GARDEN ST 117 WEST GARDEN ST PENSACOLA, FL 32502 PENSACOLA, FL 32502

Current Mailing Address: New Mailing Address:

P.O.BOX 550 P.O.BOX 550

117 WEST GARDEN ST PENSACOLA, FL 32591 PENSACOLA, FL 32502

FEI Number: 59-2297826 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:

HART, ROBERT

125 W ROMANO ST, SUITE 800

PENSACOLA, FL 32591 US

RITCHIE, BUZZ

40 N PALAFOX ST

PENSACOLA, FL 32502 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: BUZZ RITCHIE 01/03/2006

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

 Fitle:
 D
 () Delete
 Title:
 D
 (X) Change () Addition

 Name:
 RITCHIE, BUZZ

 Name:
 RITCHIE, BUZZ

 Name:
 RITCHIE, BUZZ
 Name:
 RITCHIE, BUZZ

 Address:
 P.O. BOX 12870
 Address:
 40 N PALAFOX ST

 City-St-Zip:
 PENSACOLA, FL 32591
 City-St-Zip:
 PENSACOLA, FL 32502

 Name:
 HART, ROBERT
 Name:
 O'SULLIVAN, MORT

 Address:
 125 W ROMANO ST, SUITE 800
 Address:
 316 S BAYLEN ST

 City-St-Zip:
 PENSACOLA, FL 32591
 City-St-Zip:
 PENSACOLA, FL 32502

Title: D () Delete Title: () Change () Addition

 Name:
 BAKER, DICK
 Name:

 Address:
 PO BOX 12358
 Address:

 City-St-Zip:
 PENSACOLA, FL 32582
 City-St-Zip:

Title: D () Delete Title: () Change () Addition

 Name:
 EVON, EMERSON
 Name:

 Address:
 117 W GARDEN ST
 Address:

 City-St-Zip:
 PENSACOLA, FL 32501
 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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: EVON EMERSON D 01/03/2006