2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT#764743

FILED Apr 22, 2006 Secretary of State

Entity Name: LAKE WEIR CHAMBER OF COMMERCE

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

COUNTY HWY 25 PO BOX 817 13125 SE C-25

13125 SE CR-25 OKLAWAHA, FL 32179 OKLAWAHA, FL 32179

Current Mailing Address: New Mailing Address:

13125 SE CR-25 OCKLAWAHA, FL 32179

FEI Number: 59-0896892 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:

AYOTTE, ERNEST PO BOX 965 13125 SE HWY C-25 OCKLAWAHA, FL 32183 US

OFFICERS AND DIRECTORS:

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:

Date

Electronic Signature of Registered Agent

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

() Delete (X) Change () Addition

LILLIE, RICHARD LILLIE, RICHARD Name: Name: 909 SE 155 ST Address: PO BOX 2203 Address:

City-St-Zip: SUMMERFIELD, FL 34491 City-St-Zip: OCKLAWAHA, FL 32183

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

Name: AYOTTE, ERNIE Name: AYOTTE, ERNIE Address: 12130 SE 139TH AVE. Address: 12130 SE 139TH AVE. City-St-Zip: OCKLAWAHALA, FL 32179 City-St-Zip: OCKLAWAHALA, FL 32179

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

JOHNSON, MARY Name: Name: Address: PO BOX 264 Address: City-St-Zip: OCKLAWAHA, FL 32183 City-St-Zip:

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

Name: BENNETT, MATHEW Name: Address: 16374 NE 13TH PL Address: City-St-Zip: SILVER SPRINGS, FL 34488 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: ERNEST AYOTTE **TRES** 04/22/2006