

2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 767325

FILED
Apr 14, 2010
Secretary of State

Entity Name: GREATER CHIEFLAND AREA CHAMBER OF COMMERCE, INC.

Current Principal Place of Business:

23 SE 2ND AVE
CHIEFLAND, FL 32626 US

New Principal Place of Business:

Current Mailing Address:

PO BOX 1397
CHIEFLAND, FL 32644 US

New Mailing Address:

FEI Number: 59-2458568

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BEAUCHAMP, ROBERT
105 E PARK AVE
CHIEFLAND, FL 32626 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: P
Name: BELL, NANCY
Address: 712 NORTH MAIN STREET
City-St-Zip: CHIEFLAND, FL 32626

Title: VP
Name: SMITH, SHEILA
Address: P.O. BOX 1724
City-St-Zip: CHIEFLAND, FL 32644

Title: ED
Name: BELL, MICHELE
Address: 23 SE 2ND AVENUE
City-St-Zip: CHIEFLAND, FL 32626

Title: T
Name: SPANN, PRENTICE
Address: 16051 NW 30TH AVENUE
City-St-Zip: TRENTON, FL 32693

Title: D
Name: RENAUD, DAVID
Address: 12388 NW HIGHWAY 19
City-St-Zip: CHIEFLAND, FL 32626

Title: D
Name: ALEXANDER, ROB
Address: 1604 NORTH YOUNG BLVD
City-St-Zip: CHIEFLAND, FL 32626

I hereby 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 all other like empowered.

SIGNATURE: MICHELE BELL

ED

04/14/2010

Electronic Signature of Signing Officer or Director

Date