

2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 769406

FILED
Feb 09, 2012
Secretary of State

Entity Name: CEDAR KEY AREA CHAMBER OF COMMERCE, INC.

Current Principal Place of Business:

490 2ND STREET
CEDAR KEY, FL 32625 US

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 610
CEDAR KEY, FL 32625 US

New Mailing Address:

FEI Number: 59-2385849

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

RYAN, CHRISTINE
8040 F STREET
CEDAR KEY, FL 32625 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: DENNISON, ANDREA
Address: P.O. BOX 119
City-St-Zip: CEDAR KEY, FL 32625

Title: VP
Name: WILSON, BRUCE
Address: P.O. BOX 150
City-St-Zip: CEDAR KEY, FL 32625

Title: S/T
Name: RYAN, CHRISTINE
Address: P.O. BOX 628
City-St-Zip: CEDAR KEY, FL 32625

Title: D
Name: JUNGKLAUS, ERIC
Address: P.O. BOX 612
City-St-Zip: CEDAR KEY, FL 32625

Title: D
Name: GEORGE, OAKLEY
Address: P.O. BOX 482
City-St-Zip: CEDAR KEY, FL 32625

Title: D
Name: PETER, STEFANI
Address: P.O. BOX 716
City-St-Zip: CEDAR KEY, FL 32625

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: CHRISTINE RYAN

SEC.

02/09/2012

Electronic Signature of Signing Officer or Director

Date