

FILE NOW: FILING FEE IS \$61.25

FILED
Jan 30 1997 8:00am
Secretary of State

NONPROFIT
CORPORATION
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # C93000000013 (6)

1. Corporation Name

FERNANDINA BEACH CHAMBER OF COMMERCE

Principal Place of Business

102 CENTRE ST
FERNANDINA BCH. FL 32034

Mailing Address

PO BOX 472
FERNANDINA BCH. FL 32035-0472
US



2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip

Country

24

25

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip

Country

29

30

3. Date Incorporated or Qualified
03/14/1956

3a. Date of Last Report
04/24/1996

4. FEI Number

59-0717156

Applied For

Not Applicable

5. Certificate of Status Desired

☒ \$8.75 Additional Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐ \$5.00 May Be Added to Fees

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes

☒ Yes ☐ No

9. Name and Address of Current Registered Agent

STEIN, SHERRY F
102 CENTRE ST
FERNANDINA BCH. FL 32034

10. Name and Address of New Registered Agent

81 Name
MARTHA C. MEECE

82 Street Address (P.O. Box Number is Not Acceptable)
102 CENTRE ST.

83

84 City
FERNANDINA BCH., FL

85 Zip Code
32034

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE

Martha C. Meece, Office Manager

1-23-97

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent's signature required when re-stating)

DATE

12. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
TD
MOCK, WILLIAM J.
317 CENTRE ST
FERNANDINA BCH FL

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
VD
CARSCH, MICHAEL
4750 AMELIA ISLAND PKWY
FERNANDINA BCH. FL

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
PD
TOWNSEND, JAMES L
1900 S 14TH ST
FERNANDINA BCH. FL

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
VD
BLALOCK, NEIL
313 CENTRE ST
FERNANDINA BCH. FL

☒ DELETE

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
MD
STEIN, SHERRY F
102 CENTRE ST.
FERNANDINA BCH. FL 32034

☒ DELETE

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE
12 NAME
13 STREET ADDRESS
14 CITY - ST - ZIP

☐ Change ☐ Addition

21 TITLE
22 NAME
23 STREET ADDRESS
24 CITY - ST - ZIP
PD

☒ Change ☐ Addition

31 TITLE
32 NAME
33 STREET ADDRESS
34 CITY - ST - ZIP
VD

☒ Change ☐ Addition

41 TITLE
42 NAME
43 STREET ADDRESS
44 CITY - ST - ZIP
VD
WAYNE STUBBS
501 N. THIRD ST
FERNANDINA BCH, FL 32034

☐ Change ☒ Addition

51 TITLE
52 NAME
53 STREET ADDRESS
54 CITY - ST - ZIP

☐ Change ☐ Addition

61 TITLE
62 NAME
63 STREET ADDRESS
64 CITY - ST - ZIP

☐ Change ☐ Addition

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

Martha C. Meece

1-23-97 32034

CR2E037 (9/96)