

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000007654

FILED  
Jan 12, 2009  
Secretary of State

**Entity Name:** GREATER NEW PORT RICHEY JUNIOR CHAMBER OF COMMERCE, INC.

**Current Principal Place of Business:**

8645 RIDGE ROAD  
NEW PORT RICHEY, FL 34652

**New Principal Place of Business:**

**Current Mailing Address:**

6304 BANDURA AVE.  
NEW PORT RICHEY, FL 34653

**New Mailing Address:**

**FEI Number:** 59-3249029

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

LEARMAN, KARL E  
6304 BANDURA AVE.  
NEW PORT RICHEY, FL 34653 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 ( ) Delete  
Name: LEARMAN, KARL E  
Address: 6304 BANDURA AVE.  
City-St-Zip: NEW PORT RICHEY, FL 34653

Title: T ( ) Delete  
Name: CONLIN, DOUGLAS  
Address: 5752 LIDDELL DR.  
City-St-Zip: NEW PORT RICHEY, FL 34652

Title: S ( ) Delete  
Name: GINGRICH, EDITH  
Address: 5752 LIDDELL DR.  
City-St-Zip: NEW PORT RICHEY, FL 34652

Title: D ( ) Delete  
Name: TROUTWINE, DUANE  
Address: 3606 KINGSBURY DR.  
City-St-Zip: HOLIDAY, FL 34691

Title: D ( ) Delete  
Name: LINK, STACY  
Address: 2294 CANFIELD DR.  
City-St-Zip: SPRINGHILL, FL 34609

Title: D ( ) Delete  
Name: KELLER, TOM  
Address: 2115 SWAN LANE  
City-St-Zip: SAFETY HARBOR, FL 34695

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: T (X) Change ( ) Addition  
Name: GILMER, WALTER  
Address: 1593 LIMA WAY  
City-St-Zip: CLEARWATER, FL 33764

Title: S (X) Change ( ) Addition  
Name: THOMSON, ROBERT  
Address: 6503 GINNI DR.  
City-St-Zip: HUDSON, FL 34668

Title: D (X) Change ( ) Addition  
Name: LIVIO, ERIC  
Address: 6316 BANDURA AVE.  
City-St-Zip: NEW PORT RICHEY, FL 34653

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify 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: KARL E. LEARMAN

P

01/12/2009

Electronic Signature of Signing Officer or Director

Date