

2010 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT**FILED**
Jul 14, 2010
Secretary of State

DOCUMENT# N07000000463

Entity Name: BAY AREA CHAMBER FOUNDATION, INC.**Current Principal Place of Business:**100 2ND AVE. NORTH, STE. 150
ST. PETERSBURG, FL 33701**New Principal Place of Business:****Current Mailing Address:**100 2ND AVE. NORTH, STE. 150
ST. PETERSBURG, FL 33701**New Mailing Address:****FEI Number:** 76-0848045**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**ST. PETERSBURG AREA CHAMBER OF COMMERCE IN
100 2ND AVE. NORTH, STE. 150
ST. PETERSBURG, FL 33701 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: CD
Name: MORGAN, SIDNEY
Address: 100 2ND AVE N, SUITE 150
City-St-Zip: ST. PETERSBURG, FL 33701

Title: PD
Name: LALLUCCI, MARY F
Address: 100 2ND AVE N, SUITE 150
City-St-Zip: ST. PETERSBURG, FL 33701

Title: STD
Name: WIMBERLY, MARK
Address: 100 2ND AVE N, SUITE 150
City-St-Zip: ST. PETERSBURG, FL 33701

Title: D
Name: SHER, CRAIG H
Address: 100 2ND AVE N, SUITE 150
City-St-Zip: ST. PETERSBURG, FL 33701

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: MARY F LALLUCCI

PD

07/14/2010

Electronic Signature of Signing Officer or Director

Date