2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
May 21, 2009
Secretary of State

DOCUMENT# N08403

Entity Name: THE AVON PARK CHAMBER OF COMMERCE, INC.

Current Principal Place of Business:

28 EAST MAIN STREET
AVON PARK, FL 33825

New Principal Place of Business:

Current Mailing Address:

28 EAST MAIN STREET
AVON PARK, FL 33825

New Mailing Address:

FEI Number: 59-1975354 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

GREENSLADE, DAVID
28 E MAIN ST
AVON PARK, FL 33825 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: PP (X) Delete
Name: MELITI, DENNIS
Address: 4200 SUN N' LAKE BLVD
City-St-Zip: SEBRING, FL 33871

Title: PD ( ) Delete
Name: LONG-MCGRATH, KARI
Address: 800 U. S. 27 NORTH
City-St-Zip: AVON PARK, FL 33825

Title: VPD ( ) Delete
Name: MECHLIN, JEFF
Address: 98 JIM ROGERS AVENUE
City-St-Zip: AVON PARK, FL 33825

Title: VPD ( ) Delete
Name: BILDER, BARRY
Address: 4200 SUN N' LAKE BLVD.
City-St-Zip: SEBRING, FL 33871

Title: TD ( ) Delete
Name: WHIDDEN, JERRY
Address: 800 WEST MAIN STREET
City-St-Zip: AVON PARK, FL 33825

Title: SD ( ) Delete
Name: BECKMAN, RHONDA
Address: 120 WEST COLLEGE DRIVE
City-St-Zip: AVON PARK, FL 33825

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: PP (X) Change ( ) Addition
Name: LONG-MCGRATH, KARI
Address: 800 U. S. 27 NORTH
City-St-Zip: AVON PARK, FL 33825

Title: PD (X) Change ( ) Addition
Name: MECHLIN, JEFF
Address: 98 JIM ROGERS AVENUE
City-St-Zip: AVON PARK, FL 33825

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

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: DAVID GREENSLADE ED 05/21/2009

Electronic Signature of Signing Officer or Director — Date