## 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N09242

FILED Apr 03, 2008 Secretary of State

Entity Name: THE FT. MYERS BEACH CHAMBER OF COMMERCE FOUNDATION, INC.

Current Principal Place of Business: New Principal Place of Business:

17200 SAN CARLOS BLVD

FT. MYERS BEACH, FL 33931 US

Current Mailing Address: New Mailing Address:

17200 SAN CARLOS BLVD

FT. MYERS BEACH, FL 33931 US

FEI Number: 59-2539155 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

PETRUCCELLI, D. J.

17200 SAN CARLOS BLVD

FT. MYERS BEACH, FL 33931 US

ALBION, JOHN E DIR

12300 JEWEL STONE LANE

FORT MYERS, FL 33913 US

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: JOHN E. ALBION 04/03/2008

Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

tle: PD ( ) Delete Title: PD (X) Change ( ) Addition

Name:MYERS, FRANCES,Name:MYERS, FRANCES,Address:21461 WIDGEON TERAddress:21461 WIDGEON TER

City-St-Zip: FT. MYERS BEACH, FL 33931 US

Title: VD ( ) Delete Title: VD (X) Change ( ) Addition

Name: SMITH, ROXIE, Name: SMITH, ROXIE,
Address: 394 ESTERO BLVD.. #506 Address: 394 ESTERO BLVD.. #506

City-St-Zip: FT MYERS BCH., FL City-St-Zip: FT MYERS BCH., FL 33931 US

Title: D () Delete Title: D (X) Change () Addition

Name:ALBION, JOHN,Name:ALBION, JOHN,Address:15101 PARKSIDE DR.Address:12300 JEWEL STONE LANE

City-St-Zip: T MYERS, FL City-St-Zip: FT MYERS, FL 33913

Title: SD ( ) Delete Title: SD (X) Change ( ) Addition

 Name:
 PETRUCCELLI, D.J.,
 Name:
 PETRUCCELLI, D.J.,

 Address:
 7234 DRAKE DR.
 Address:
 7234 DRAKE DR.

 City-St-Zip:
 FT. MYERS, FL
 33931 US

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: JOHN E. ALBION D 04/03/2008