

# **2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N10000002142

**FILED**  
**Apr 22, 2011**  
**Secretary of State**

**Entity Name:** NASSAU COUNTY CHAMBER OF COMMERCE FOUNDATION, INC.

**Current Principal Place of Business:**

961687 GATEWAY BLVD., SUITE 101G  
AMELIA ISLAND, FL 32034

**New Principal Place of Business:**

**Current Mailing Address:**

961687 GATEWAY BLVD., SUITE 101G  
AMELIA ISLAND, FL 32034

**New Mailing Address:**

**FEI Number:**

**FEI Number Applied For (X)**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

DUNCAN, REGINA  
961687 GATEWAY BLVD., SUITE 101G  
AMELIA ISLAND, FL 32034 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  
Name: DUNCAN, REGINA  
Address: 961687 GATEWAY BLVD., SUITE 101G  
City-St-Zip: AMELIA ISLAND, FL 32034

Title: C  
Name: AUDET, PAUL  
Address: 3199 SOUTH FLETCHER AVENUE  
City-St-Zip: FERNANDINA BEACH, FL 32034

Title: T  
Name: BAIA, TONY  
Address: 2162 SADLER DRIVE  
City-St-Zip: FERNANDINA BEACH, FL 32034

Title: D  
Name: FLICK, RON  
Address: 961687 GATEWAY BLVD.  
City-St-Zip: AMELIA ISLAND, FL 32034

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: REGINA DUNCAN

PRES

04/22/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date