

N10322

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

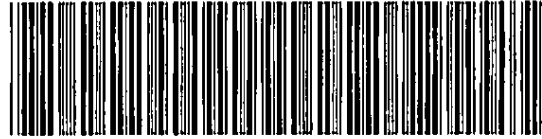
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02/06/21--01026--003 \*\*43.75

FILED  
2021 MAY 27 PM 4:45  
TALLAHASSEE, FL

11-1-2021

C Kinsey



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

March 31, 2021

CAROLYN TEN BROECK  
PO BOX 369  
WILLISTON, FL 32696

SUBJECT: WILLISTON AREA CHAMBER OF COMMERCE, INC.  
Ref. Number: N10322

We have received your document and check(s) totaling \$43.75. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

The form you submitted is for a BENEFIT/SOCIAL CORPORATION, but your entity is a NOT FOR PROFIT CORPORATION. Please complete and return the enclosed blank form(s). All pages must be returned in order to file the document.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Querida R Moore  
Regulatory Specialist II

Letter Number: 621A00006760

RECEIVED  
2021 MAY 27 PM 10:29  
SUNBIZ.ORG

COVER LETTER

TO: Amendment Section  
Division of Corporations

NAME OF CORPORATION: Williston Area Chamber of Commerce

DOCUMENT NUMBER: N 10322

The enclosed *Articles of Amendment* and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Carolyn Ten Broeck  
(Name of Contact Person)

Williston Area Chamber of Commerce  
(Firm/ Company)

P.O. Box 369  
(Address)

Williston FL 32696  
(City/ State and Zip Code)

willistonflcoc@gmail.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Carolyn Ten Broeck at 352- 528-5552  
(Name of Contact Person) (Area Code) (Daytime Telephone Number)

Enclosed is a check for the following amount made payable to the Florida Department of State:

- |  |   |   |  |
|--|---|---|--|
| <input type="checkbox"/> \$35 Filing Fee | <input checked="" type="checkbox"/> \$43.75 Filing Fee &<br>Certificate of Status | <input type="checkbox"/> \$43.75 Filing Fee &<br>Certified Copy<br>(Additional copy is<br>enclosed) | <input type="checkbox"/> \$52.50 Filing Fee<br>Certificate of Status<br>Certified Copy<br>(Additional Copy is<br>Enclosed) |
|--|---|---|--|

Mailing Address  
Amendment Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

Street Address  
Amendment Section  
Division of Corporations  
The Centre of Tallahassee  
2415 N. Monroe Street, Suite 810  
Tallahassee, FL 32303

Articles of Amendment  
to  
Articles of Incorporation  
of

Williston Area Chamber of Commerce

(Name of Corporation as currently filed with the Florida Dept. of State)

N 10322

(Document Number of Corporation (if known))

Pursuant to the provisions of section 617.1006, Florida Statutes, this *Florida Not For Profit Corporation* adopts the following amendment(s) to its Articles of Incorporation:

A. If amending name, enter the new name of the corporation:

The new name must be distinguishable and contain the word "corporation" or "incorporated" or the abbreviation "Corp." or "Inc." "Company" or "Co." may not be used in the name.

B. Enter new principal office address, if applicable:  
(Principal office address MUST BE A STREET ADDRESS)

50 NW Main St  
Williston FL 32696

C. Enter new mailing address, if applicable:  
(Mailing address MAY BE A POST OFFICE BOX)

D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address:

Name of New Registered Agent:

Carolyn Ten Broeck  
50 NW Main St

(Florida street address)

New Registered Office Address:

Williston

(City)

Florida

32696

(Zip Code)

New Registered Agent's Signature, if changing Registered Agent:

*I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.*

Carolyn Ten Broeck  
Signature of New Registered Agent, if changing

If amending the Officers and/or Directors, enter the title and name of each officer/director being removed and title, name, and address of each Officer and/or Director being added:

(Attach additional sheets, if necessary)

Please note the officer/director title by the first letter of the office title:

P = President; V= Vice President; T= Treasurer; S= Secretary; D= Director; TR= Trustee; C = Chairman or Clerk; CEO = Chief Executive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each office held. President, Treasurer, Director would be PTD.

Changes should be noted in the following manner. Currently John Doe is listed as the PST and Mike Jones is listed as the V. There is a change, Mike Jones leaves the corporation, Sally Smith is named the V and S. These should be noted as John Doe, PT as a Change, Mike Jones, V as Remove, and Sally Smith, SV as an Add.

Example:

☒ Change                      PT        John Doe

☐ Remove                      V        Mike Jones

☐ Add                              SV        Sally Smith

Type of Action (Check One)	Title	Name	Address
1) <input type="checkbox"/> Change	<u>P</u>	<u>R. Gerald Hethcoat</u>	<u>610 NE Second St.</u>
<input type="checkbox"/> Add			<u>Williston FL 32696</u>
<input checked="" type="checkbox"/> Remove			
2) <input type="checkbox"/> Change		<u>Joseph Lewis</u>	<u>SE Eighth St.</u>
<input type="checkbox"/> Add			<u>Williston FL 32696</u>
<input checked="" type="checkbox"/> Remove			
3) <input type="checkbox"/> Change		<u>Jack M. Hoy</u>	<u>426 W Noble Ave.</u>
<input type="checkbox"/> Add			<u>Williston FL 32696</u>
<input checked="" type="checkbox"/> Remove			
4) <input type="checkbox"/> Change		<u>Robert Sandlin</u>	<u>N Hwy. 41</u>
<input type="checkbox"/> Add			<u>Williston FL 32696</u>
<input checked="" type="checkbox"/> Remove			
5) <input type="checkbox"/> Change		<u>E.A.W. "Pan" Zettler</u>	<u>S Hwy. 27</u>
<input type="checkbox"/> Add			<u>Williston FL 32696</u>
<input checked="" type="checkbox"/> Remove			
6) <input type="checkbox"/> Change		<u>William T. Coker</u>	<u>7514 NE 42nd Ave.</u>
<input type="checkbox"/> Add			<u>Gainesville FL 32606</u>
<input checked="" type="checkbox"/> Remove			

REMOVE:

Joseph S. Carroll  
111 W Noble Ave.  
Williston FL 32696

G. Frank Etheridge  
NW 2<sup>nd</sup> Ave.  
Williston FL 32696

D.A. Kendall  
1429 Country Club Dr.  
Williston FL 32696

D

Bill Foster  
14030 SE 26 Street  
Morrison FL 32668

ADD:

P Kurt Richardson  
144 E Noble Ave  
Williston FL 32696

V Michael Langston  
37 S Main St.  
Williston FL 32696

ST Mary Martha Hartley  
342 E Noble Ave.  
Williston FL 32696

D Marc Pompeo  
147 N Main St.  
Williston FL 32696

D Ann Larkins  
308 NW Main St.  
Williston FL 32696

D Steve Quinata  
21 N Main St.  
Williston FL 32696

D Kayla Martin  
820 N Main St.  
Williston FL 32696

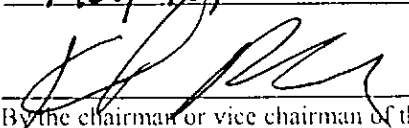
D Kelly Hars  
104 NW 10<sup>th</sup> Ave.  
Williston FL 32696



- ☐ There are no members or members entitled to vote on the amendment(s). The amendment(s) was/were adopted by the board of directors.

Dated May 13, 2021

Signature

  
(By the chairman or vice chairman of the board, president or other officer-if directors have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)

Kurt Richardson

(Typed or printed name of person signing)

President

(Title of person signing)