

# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N18582

FILED  
Jul 20, 2007  
Secretary of State

**Entity Name:** PERRY-TAYLOR COUNTY CHAMBER OF COMMERCE, INC.

**Current Principal Place of Business:**

428 N. JEFFERSON ST.  
PERRY, FL 32347 US

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 892  
PERRY, FL 32347 US

**New Mailing Address:**

**FEI Number:** 59-0772717 **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:**

PARKER, GREG ESQ  
411 N. WASHINGTON ST.  
PERRY, FL 32347 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: D ( ) Delete  
Name: TAYLOR, DAWN  
Address: 428 N JEFFERSON ST  
City-St-Zip: PERRY, FL 32347 US

Title: C ( ) Delete  
Name: SOUTHERLAND, MARK  
Address: 803 W. MAIN ST.  
City-St-Zip: PERRY, FL 32347 US

Title: T ( ) Delete  
Name: MANNING, SANDY  
Address: 20650 KEATON BEACH DRIVE  
City-St-Zip: PERRY, FL 32348 US

Title: D ( ) Delete  
Name: PARKER, GREG  
Address: 411 N. WASHINGTON ST.  
City-St-Zip: PERRY, FL 32347 US

Title: T ( ) Delete  
Name: WILLIAMS, GIL  
Address: 1402 S JEFFERSON ST  
City-St-Zip: PERRY, FL 32347 US

Title: DOB ( ) Delete  
Name: MOORE, CLINE  
Address: 316 WEST GREEN STREET  
City-St-Zip: PERRY, FL 32347

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

Title: C (X) Change ( ) Addition  
Name: GUNTER, DARYLL  
Address: 111 RIDGE ROAD  
City-St-Zip: PERRY, FL 32347 US

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

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: DAWN V. TAYLOR

DIR

07/20/2007

Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date