## 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N22890

FILED Apr 05, 2007 Secretary of State

Entity Name: SIESTA KEY CHAMBER OF COMMERCE, INC.

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

5118 OCEAN BLVD. SUITE #14

SIESTA KEY, FL 34242

**New Mailing Address: Current Mailing Address:** 

5118 OCEAN BLVD. SUITE #14

SIESTA KEY, FL 34242 US

FEI Number: 59-2798966 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:

TRACY, CATHERINE L CPA MENCHINGER, THOMAS A CPA 2058 CÓNSTITUTION BLVD. 2831 RINGLING BOULEVARD SARASOTA, FL 34231 SARASOTA, FL 34237

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: THOMAS A. MENCHINGER 04/05/2007

> Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

Name:

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

(X) Change ( ) Addition () Delete

LIEURANCE-KIRSCHER, PAM VALENTINE, CHARLIE Name: Name: 5295 BOX TURTLE CIRCLE Address: 5164 KESTRAL PARK TERRACE Address: City-St-Zip: SARASOTA, FL 34242 City-St-Zip: SARASOTA, FL 34241

(X) Change ( ) Addition Title: () Delete Title: VALENTINE, CHARLIE Name: BLANCO, JENNIFER Name:

Address: 5164 KESTRAL PARK TERR Address: 5164 KESTRAL PARK TERR City-St-Zip: SARASOTA, FL 34231 City-St-Zip: SARASOTA, FL 34231

Title: () Delete Title: (X) Change ( ) Addition SHURTLEFF, WENDY DAVID, MAGEE Name: Name:

4221 LANCASTER DRIVE Address: Address: 1011 SEASIDE DRIVE City-St-Zip: SARASOTA, FL 34241 City-St-Zip: SARASOTA, FL 34242

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

DAVIE, MAGEE Name: 1011 SEASIDE DR Address: Address: City-St-Zip: SARASOTA, FL 34242 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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: CHARLIE VALENTINE Ρ 04/05/2007