

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N28040

FILED
Jan 10, 2005
Secretary of State

Entity Name: THE GULF BREEZE AREA CHAMBER OF COMMERCE, INC.

Current Principal Place of Business:

409 GULF BREEZE PKWY
GULF BREEZE, FL 32561

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 337
GULF BREEZE, FL 325620337

New Mailing Address:

FEI Number: 59-2901259

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SANSOM, RANDALL L
87 BAYBRIDGE PARK
GULF BREEZE, FL 32561 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: PD () Delete
Name: NITTERAUER, JIM
Address: 3 WEST GARDEN STM 326
City-St-Zip: PENSACOLA, FL 32501

Title: SD () Delete
Name: LIVINGSTON, ANN
Address: P.O. BOX 683
City-St-Zip: GULF BREEZE, FL 32562

Title: ED () Delete
Name: KIMBROUGH, SANDY
Address: 409 GULF BREEZE PKWY
City-St-Zip: GULF BREEZE, FL 32561

Title: TD () Delete
Name: LILLEY, FRED
Address: 1101 GULF BREEZE PKWY BLDG5 STE 12
City-St-Zip: GULF BREEZE, FL 32561

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: YOUNG, JENNIFER
Address: 25 WEST CEDAR, STE 600
City-St-Zip: PENSACOLA, FL 32502

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

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

Title: TD (X) Change () Addition
Name: ALONSO, DEBB
Address: P.O. BOX 370
City-St-Zip: GULF BREEZE, FL 32562

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: SANDRA KIMBROUGH

ED

01/10/2005

Electronic Signature of Signing Officer or Director

Date