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Mar 17 1997 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT
1997

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **N29741** **(8)**

1. Corporation Name
CENTURY CHAMBER OF COMMERCE INCORPORATED

Principal Place of Business	Mailing Address
HIGHWAY 4 P.O. BOX 857 CENTURY FL 32535	HIGHWAY 4 P.O. BOX 857 CENTURY FL 32535-0857

3. Date Incorporated or Qualified: **12/15/1988**
3a. Date of Last Report: **03/13/1996**

2. Principal Place of Business — 21
2a. Mailing Address — 26
Suite, Apt. #, etc. — 22 / 27
City & State — 23 / 28
Zip — 24 / 29 — Country — 25 / 30

4. FEI Number: **59-2931610** ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

BARNES, EDNA EARLE
619 4TH STREET
CENTURY FL 32535

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City **FL** 85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE Edna E. Barnes
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	D	☐ DELETE	1.1 TITLE		☐ Change ☐ Addition
NAME	CUNNINGHAM, JOHNNY F.		1.2 NAME		
STREET ADDRESS	CENTURY BLVD.		1.3 STREET ADDRESS		
CITY-ST-ZIP	CENTURY FL		1.4 CITY-ST-ZIP		
TITLE	D	☐ DELETE	2.1 TITLE		☐ Change ☐ Addition
NAME	BARNES, BENNY		2.2 NAME		
STREET ADDRESS	619 4TH ST		2.3 STREET ADDRESS		
CITY-ST-ZIP	CENTURY FL		2.4 CITY-ST-ZIP		
TITLE	ST	☐ DELETE	3.1 TITLE		☐ Change ☐ Addition
NAME	MCCALL, MARGIE		3.2 NAME		
STREET ADDRESS	9500 SHADY LANE		3.3 STREET ADDRESS		
CITY-ST-ZIP	CENTURY FL 32535		3.4 CITY-ST-ZIP		
TITLE	D	☐ DELETE	4.1 TITLE		☐ Change ☐ Addition
NAME	ROBINSON, LEE		4.2 NAME		
STREET ADDRESS	4301 CREIGHTON ROAD		4.3 STREET ADDRESS		
CITY-ST-ZIP	PENSACOLA FL		4.4 CITY-ST-ZIP		
TITLE	D	☐ DELETE	5.1 TITLE		☐ Change ☐ Addition
NAME	SMITH, CURTIS E		5.2 NAME		
STREET ADDRESS	3111 HIGHWAY 168		5.3 STREET ADDRESS		
CITY-ST-ZIP	CENTURY FL		5.4 CITY-ST-ZIP		
TITLE	C	☐ DELETE	6.1 TITLE		☐ Change ☐ Addition
NAME	BARNES, EDNA EARLE		6.2 NAME		
STREET ADDRESS	P.O. BOX 433 N/A		6.3 STREET ADDRESS		
CITY-ST-ZIP	CENTURY FL 32535		6.4 CITY-ST-ZIP		

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE

CR2E037 (9/96)