2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N45852

FILED Apr 22, 2009 Secretary of State

Entity Name: FLAGLER BEACH CHAMBER OF COMMERCE, INC.

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

207 SOUTH CENTRAL AVE. FLAGLER BEACH, FL 32136

Current Mailing Address: New Mailing Address:

20 AIRPORT ROAD SUITE C PALM COAST, FL 32164

FEI Number: 65-0321325 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:

STOKES, LEA

109 S. 6TH STREET

FLAGLER BEACH, FL 32136 US

BAXTER, DOUGLAS J
20 AIRPORT ROAD
SUITE C

PALM COAST, FL 32130 US PALM COAST, FL 32137 US

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: DOUGLAS J BAXTER 04/22/2009

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P () Delete Title: CHR (X) Change () Addition Name: STOKES, LEA STOKES, LEA

Address: 109 S. 6TH STREET Address: 109 SOUTH 6TH STREET

City-St-Zip: FLAGLER BEACH, FL 32136 City-St-Zip: FLAGLER BEACH, FL 32136

Title: VP () Delete Title: EVC (X) Change () Addition Name: PRUDEN, TERI Name: WHETSELL, ALLEN

Address: PO BOX 2480 Address: 511 OLD KINGS ROAD SOUTH
City-St-Zip: FLAGLER BEACH, FL 32136 City-St-Zip: FLAGLER BEACH, FL 32136

Title: T/S () Delete Title: SEC (X) Change () Addition Name: STETLER, MARY A Name: CARNEY, KIM

Address: 205 N CENTRAL AVE Address: 2601 MOODY BOULEVARD
City-St-Zip: FLAGLER BEACH, FL 32136 City-St-Zip: FLAGLER BEACH, FL 32136

Title: () Delete Title: EVP () Change (X) Addition Name: DELORENZO, REBECCA B

 Address:
 Address:
 20 AIRPORT ROAD, SUITE C

 City-St-Zip:
 City-St-Zip:
 PALM COAST, FL 32164

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: DOUGLAS J BAXTER PRES 04/22/2009

Electronic Signature of Signing Officer or Director

Date