

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N49036

FILED  
Jan 03, 2008  
Secretary of State

**Entity Name:** THE PENSACOLA BAY AREA CHAMBER OF COMMERCE, INC.

**Current Principal Place of Business:**

117 W GARDEN STREET  
PENSACOLA, FL 32502 US

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 550  
PENSACOLA, FL 32591 US

**New Mailing Address:**

FEI Number: 59-0190330

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

RITCHIE, BUZZ  
40 N PALAFOX ST  
PENSACOLA, FL 32502 US

**Name and Address of New Registered Agent:**

O'SULLIVAN, J. M III  
316 S BAYLEN ST  
PENSACOLA, FL 32502 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: J. MORT O'SULLIVAN, III

01/03/2008

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: CD ( ) Delete  
Name: RITCHIE, BUZZ  
Address: 40 N PALAFOX ST  
City-St-Zip: PENSACOLA, FL 32502

Title: CED ( ) Delete  
Name: O'SULLIVAN, MORT  
Address: 316 S BAYLEN ST  
City-St-Zip: PENSACOLA, FL 32502

Title: TD ( ) Delete  
Name: BAKER, DICK  
Address: P.O. BOX 12358  
City-St-Zip: PENSACOLA, FL 32582

Title: PCED ( ) Delete  
Name: EMERSON, EVON  
Address: 117 W GARDEN STREET  
City-St-Zip: PENSACOLA, FL 32501

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

Title: CED (X) Change ( ) Addition  
Name: ADAMS, BLAISE  
Address: 2200 AIRPORT BLVD  
City-St-Zip: PENSACOLA, FL 32504

Title: CD (X) Change ( ) Addition  
Name: O'SULLIVAN, MORT  
Address: 316 S BAYLEN ST  
City-St-Zip: PENSACOLA, FL 32502

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: EVON EMERSON

PCED

01/03/2008

Electronic Signature of Signing Officer or Director

Date