2011 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT

FILED Mar 23, 2011 DOCUMENT# N50519 Secretary of State

Entity Name: GULF COUNTY CHAMBER OF COMMERCE, INC.

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

150 CAPT. FRED'S PLACE PORT ST. JOE, FL 32456

Current Mailing Address: New Mailing Address:

PO BOX 964

PORT ST. JOE, FL 32457

FEI Number: 59-0772742 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:

CHAFIN, SANDRA B 107 SUNSET CIRCLE

PORT SAINT JOE, FL 32456 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:

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

PRES

PICKELS, ROBERT L Name: Address: 2112 LONG AVENUE City-St-Zip: PORT ST. JOE, FL 32456

Title:

Name: NEWMAN, GEORGE S JR. Address: 1409 CONSTITUTION DRIVE City-St-Zip: PORT ST. JOE, FL 32456

Title: **TRES**

THOMPSON, RAYMOND Name: Address: 138 GULF COAST CIRCLE City-St-Zip: PORT ST. JOE, FL 32456

Title: SEC.

Name: ASHBROOK, DAVID 102 CHRISTINS CURVE Address: City-St-Zip: PORT. ST. J0E, FL 32456

Title: **EXED**

Name: CHAFIN, SANDRA 107 SUNSET CR Address: PORT ST. JOE, FL 32456 City-St-Zip:

Title:

WHITE, JOHANNA Name: Address: 107 SAUNDERS CIRCLE PORT SAINT JOE, FL 32456 City-St-Zip:

I hereby 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 all other like empowered.

SIGNATURE: SANDRA B. CHAFIN ED 03/23/2011