2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 28, 2012
Secretary of State

DOCUMENT# N50519

Entity Name: GULF COUNTY CHAMBER OF COMMERCE, INC.

Current Principal Place of Business:

406 MARINA DR
PORT ST JOE, FL 32457

New Principal Place of Business:

406 MARINA DR
PORT ST JOE, FL 32456

Current Mailing Address:

PO BOX 964
PORT ST. JOE, FL 32457

New Mailing Address:

FEI Number: 59-0772742 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

SELLERS, BARRY
406 MARINA DR
PORT ST JOE, FL 32457 US

Name and Address of New Registered Agent:

SELLERS, BARRY
406 MARINA DR
PORT ST 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: BARRY SELLERS 03/28/2012
Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: PRES
Name: GUERRY, MAGIDSON
Address: 406 MARINA DR
City-St-Zip: PORT ST. JOE, FL 32456

Title: VPD
Name: ASHBROOK, DAVID
Address: 406 MARINA DR
City-St-Zip: PORT ST. JOE, FL 32456

Title: TRES
Name: THOMPSON, RAYMOND
Address: 406 MARINA DR
City-St-Zip: PORT ST. JOE, FL 32456

Title: SEC.
Name: MCKENZIE, MICHAEL
Address: 406 MARINA DR
City-St-Zip: PORT. ST. J0E, FL 32456

Title: EXED
Name: BARRY, SELLERS
Address: 406 MARINA DR
City-St-Zip: PORT ST. JOE, FL 32456

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: DAVID ASHBROOK VPS 03/28/2012
Electronic Signature of Signing Officer or Director Date