## 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N95000001721

FILED Apr 30, 2008 Secretary of State

Entity Name: JAY AREA CHAMBER OF COMMERCE, INC.

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

3425 HWY. 4 JAY, FL 32565

Current Mailing Address: New Mailing Address:

P O BOX 364 JAY, FL 32565

FEI Number: 59-3309943 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired (X)

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

WHITE, DAVID G 210 CHURCH ST

PENSACOLA, FL 32594 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:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P ( ) Delete Title: P (X) Change ( ) Addition Name: DIGMON, MIKE P (X) Change ( ) Addition Name: BUTLER, JODIE

Address: 141 SIGLAR RD Address: 3425 HWY 4
City-St-Zip: MC DAVID, FL 32568 City-St-Zip: JAY, FL 32565

Title: VP ( ) Delete Title: VP (X) Change ( ) Addition

 Name:
 HUTCHINS, MIKE
 Name:
 ARD, JACKIE

 Address:
 5712 TAMARACK DRIVE
 Address:
 108 ROBIN STREET

 City-St-Zip:
 PACE, FL 32571
 City-St-Zip:
 JAY, FL 32565

Title: T ( ) Delete Title: ( ) Change ( ) Addition

 Name:
 PRESCOTT, BECKY
 Name:

 Address:
 4538 WATERMILL ROAD
 Address:

 City-St-Zip:
 JAY, FL 32565
 City-St-Zip:

 $\label{eq:title:S} {\sf Title:} \qquad {\sf S} \qquad {\sf ()} \ {\sf Delete} \qquad \qquad {\sf Title:} \qquad {\sf S} \qquad {\sf (X)} \ {\sf Change} \ {\sf ()} \ {\sf Addition}$ 

Name: RANEY, SHIRLEY Name: DOBSON, DRU

Address: 5050 DOGWOOD DRIVE Address: 12725 SCENIC LAKE DRIVE

City-St-Zip: JAY, FL 32565 City-St-Zip: JAY, FL 32565

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: BECKY PRESCOTT T 04/30/2008