

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N95000001721

FILED
Apr 15, 2009
Secretary of State

Entity Name: JAY AREA CHAMBER OF COMMERCE, INC.

Current Principal Place of Business:

3425 HWY. 4
JAY, FL 32565

New Principal Place of Business:

Current Mailing Address:

P O BOX 364
JAY, FL 32565

New Mailing Address:

FEI Number: 59-3309943

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WHITE, DAVID G
210 CHURCH ST
PENSACOLA, FL 32594 US

Name and Address of New Registered Agent:

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:

Title: P () Delete
Name: BUTLER, JODIE
Address: 3425 HWY 4
City-St-Zip: JAY, FL 32565

Title: VP () Delete
Name: ARD, JACKIE
Address: 108 ROBIN STREET
City-St-Zip: JAY, FL 32565

Title: T () Delete
Name: PRESCOTT, BECKY
Address: 4538 WATERMILL ROAD
City-St-Zip: JAY, FL 32565

Title: S () Delete
Name: DOBSON, DRU
Address: 12725 SCENIC LAKE DRIVE
City-St-Zip: JAY, FL 32565

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: STEWART-ARD, JACKIE
Address: PO BOX 65
City-St-Zip: JAY, FL 32565

Title: VP (X) Change () Addition
Name: ENGLISH, DAVID
Address: 4035 HWY 4
City-St-Zip: JAY, FL 32565

Title: T (X) Change () Addition
Name: DOBSON, DRU
Address: 12725 SCENIC LAKE DRIVE
City-St-Zip: JAY, FL 32565

Title: S (X) Change () Addition
Name: RANEY, SHIRLEY
Address: 5050 DOGWOOD LANE
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

04/15/2009

Electronic Signature of Signing Officer or Director

Date