

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N96000005951

FILED
Sep 16, 2008
Secretary of State

Entity Name: FOUNDATION OF GREATER FORT WALTON BEACH CHAMBER OF COMMERCE, INC.

Current Principal Place of Business:

34 SE MIRACLE STRIP PARKWAY
FORT WALTON BEACH, FL 32548

New Principal Place of Business:

Current Mailing Address:

34 SE MIRACLE STRIP PARKWAY
FORT WALTON BEACH, FL 32548

New Mailing Address:

FEI Number: 59-3414046 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

THEODORE, CORCORAN
317 SPANISH MOSS TRAIL
DESTIN, FL 32541 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: JOHNSON, JAMES M III
Address: PO BOX 2769
City-St-Zip: FORT WALTON BEACH, FL 32549

Title: S () Delete
Name: GIBSON, AGGIE
Address: 3 NE RACETRACK ROAD
City-St-Zip: FORT WALTON BEACH, FL 32547

Title: V () Delete
Name: MICELI, PHILIPPE
Address: 799 E. JOHN SIMS PARKWAY
City-St-Zip: NICEVILLE, FL 32578

Title: T () Delete
Name: CARMICHAEL, GAYLE
Address: 29 N. EGLIN PARKWAY
City-St-Zip: FORT WALTON BEACH, FL 32548

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: V (X) Change () Addition
Name: FREGGER, MICHAEL DR
Address: 17 RACETRACK ROAD NW
City-St-Zip: FORT WALTON BEACH, FL 32547

Title: S (X) Change () Addition
Name: KENDALL, HUGH
Address: 76 BEAL PARKWAY
City-St-Zip: FORT WALTON BEACH, FL 32548

Title: T (X) Change () Addition
Name: MAHONE, PEGGY
Address: 4608 OPA LOCKA LANE, SUITE 300
City-St-Zip: DESTIN, FL 32541

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: DR MICHAEL FREGGER

V

09/16/2008

Electronic Signature of Signing Officer or Director

Date