

2008 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N96000006106

FILED
May 01, 2008
Secretary of State

Entity Name: NAPLES JUNIOR CHAMBER OF COMMERCE, INC.

Current Principal Place of Business:

P.O. BOX 10416
NAPLES, FL 34102 US

New Principal Place of Business:

2424 DAVIS BLVD
A
NAPLES, FL 34102 US

Current Mailing Address:

P.O. BOX 10416
NAPLES, FL 34102 US

New Mailing Address:

P.O. BOX 7721
NAPLES, FL 34102 US

FEI Number: 59-3412718 **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:

DOUGLASS, WILLIAM
600 ST. ANDREWS BLVD
NAPLES, FL 34113 US

Name and Address of New Registered Agent:

DOUGLASS, LISA
600 ST. ANDREWS BLVD
NAPLES, FL 34113 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: LISA DOUGLASS, PAST PRESIDENT

05/01/2008

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: DIR () Delete
Name: TURNER, WIN DIR
Address: 45 LIBERTY LANE
City-St-Zip: NAPLES, FL 34113 US

Title: P () Delete
Name: WASHBURN, ROBERT
Address: 600 ST. ANDREWS BLVD
City-St-Zip: NAPLES, FL 34113

Title: D () Delete
Name: DOUGLASS, WILLIAM
Address: 600 ST. ANDREWS
City-St-Zip: NAPLES, FL 34113

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DIR (X) Change () Addition
Name: TURNER, IRVING DIR
Address: 45 LIBERTY LANE
City-St-Zip: NAPLES, FL 34113 US

Title: VP (X) Change () Addition
Name: GOOD, TAMMY
Address: PO BOX 7721
City-St-Zip: NAPLES, FL 34102 US

Title: D (X) Change () Addition
Name: DOUGLASS, WILLIAM
Address: 600 ST. ANDREWS
City-St-Zip: NAPLES, FL 34113 US

Title: S () Change (X) Addition
Name: MORAN, BETH
Address: 4762 CAPRI DR
City-St-Zip: NAPLES, FL 34104 US

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: LISA DOUGLASS

PP

05/01/2008

Electronic Signature of Signing Officer or Director

Date