

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 27, 2006 8:00 am
Secretary of State

03-27-2006 90282 015 ****61.25

DOCUMENT # N97000006266

1. Entity Name
BAY COUNTY CHAMBER FOUNDATION, INC.



Principal Place of Business
235 W 5TH ST
PANAMA CITY, FL 32401

Mailing Address
235 W 5TH ST
PANAMA CITY, FL 32401

20021386



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

03012006 Chg-NP CR2E037 (11/05)

City & State

City & State

4. FEI Number
59-3479027

Applied For
Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

ROBERTS, CAROL
235 W 5TH ST
PANAMA CITY, FL 32401

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Carol A. Roberts

Executive Director

3/22/06

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

Filing Fee is \$61.25
Due by May 1, 2006

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make check payable to
Florida Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE TD ☒ Delete
NAME CLEMONS, SCOTT
STREET ADDRESS 235 W 5TH ST
CITY-ST-ZIP PANAMA CITY, FL 32401

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE TD ☐ Delete
NAME WALTERS, ELIZABETH
STREET ADDRESS 235 W 5 ST
CITY-ST-ZIP PANAMA CITY, FL 324014403

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE T ☐ Delete
NAME SOUTHERLAND, STEVE
STREET ADDRESS 235 W 5 ST
CITY-ST-ZIP PANAMA CITY, FL 32401

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE D ☐ Delete
NAME MCDONALD, GLEN
STREET ADDRESS 235 W. 5TH ST.
CITY-ST-ZIP PANAMA CITY, FL 32401

TITLE ☒ Change ☐ Addition
NAME McDonald, GLEN
STREET ADDRESS 235 W. 5th St.
CITY-ST-ZIP Panama City, FL 32401

TITLE D ☒ Delete
NAME ROSS, MIKE
STREET ADDRESS 235 W. 5TH ST.
CITY-ST-ZIP PANAMA CITY, FL 32401

TITLE ☐ Change ☒ Addition
NAME Norden, Pete
STREET ADDRESS 235 W. 5th St.
CITY-ST-ZIP Panama City, FL 32401

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☒ Addition
NAME Phillips, Andy
STREET ADDRESS 235 W. 5th St.
CITY-ST-ZIP Panama City, FL 32401

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Carol A. Roberts

Carol A. Roberts

3/22/06

(850)785-5206

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #