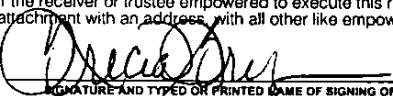


2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 23, 2006 8:00 am
Secretary of State

01-23-2006 90047 019 ****61.25

DOCUMENT # N99000004307 1. Entity Name THE NICEVILLE-VALPARAISO-BAY AREA CHAMBER OF COMMERCE FOUNDATION, INC.					
Principal Place of Business 1055 E. JOHN SIMS PARKWAY NICEVILLE, FL 32578			Mailing Address 1055 E. JOHN SIMS PARKWAY NICEVILLE, FL 32578		
2. Principal Place of Business		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State			
Zip		Country		Zip	
				Country	
4. FEI Number 31-1665996				Applied For ☐ Not Applicable	
5. Certificate of Status Desired ☐				\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent MCINNIS, C. JEFFREY 909 MAR WALT DR., STE 1014 FORT WALTON BEACH, FL 32547-6711			7. Name and Address of New Registered Agent 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 _____ 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 NAME STREET ADDRESS CITY-ST-ZIP	D FREEMAN, YVONNE 2190 HWY 85 NORTH NICEVILLE, FL 32578	☐ Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D KELLEY, CHUCK 1021-E EAST JOHN SIMS PKWY NICEVILLE, FL 32578	☐ Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D RILEY, JUDY B 1501 BAYSHORE DRIVE NICEVILLE, FL 32578	☒ Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BAILEY, KENNETH 23 S. JOHN SIMS PKWY VALPARAISO, FL 32580	☐ Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S BRUNSON, TRICIA 1055 E. JOHN SIMS PKWY NICEVILLE, FL 32578	☐ Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Scott Jackson 140 Hollywood Blvd. SW Ft Walton Beach, FL 32548	☐ Change ☒ Addition			
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition			
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition			
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition			
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: 		SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		Date 1-12-06	
				(850) 678-2323 Daytime Phone #	