

2018 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 714711

Entity Name: WASHINGTON COUNTY CHAMBER OF COMMERCE, INC.**Current Principal Place of Business:**672 5TH STREET
CHIPLEY, FL 32428**Current Mailing Address:**P.O. BOX 457
CHIPLEY, FL 32428 US**FEI Number:** 59-0806232**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**STEPHEN B. REGISTER, JR. CPA
1552 BRICKYARD ROAD
CHIPLEY, FL 32428 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:** STEPHEN B. REGISTER, JR.

03/26/2018

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title PRESIDENT
Name JULIE, DILLARD
Address P.O. BOX 457
City-State-Zip: CHIPLEY FL 32428

Title CHAIR-EDC
Name WALL, DARRIN
Address P.O. BOX 457
City-State-Zip: CHIPLEY FL 32428

Title TREASURER
Name LOVERING, BRANDON
Address P.O. BOX 457
City-State-Zip: CHIPLEY FL 32428

Title SENIOR VICE PRESIDENT
Name BAREFIELD, NICOLE
Address P.O. BOX 457
City-State-Zip: CHIPLEY FL 32428

Title VP
Name KOZAR, MICHAEL
Address P.O. BOX 457
City-State-Zip: CHIPLEY FL 32428

Title DIRECTOR
Name PAGE, JAN
Address P.O. BOX 457
City-State-Zip: CHIPLEY FL 32428

I hereby 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 all other like empowered.

SIGNATURE: JULIE DILLARD

PRESIDENT

03/26/2018

Electronic Signature of Signing Officer/Director Detail

Date