#### **2013 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

**DOCUMENT# 745015** 

Entity Name: ST. JOHNS COUNTY CHAMBER OF COMMERCE, INC.

FILED
Apr 18, 2013
Secretary of State
CC1271352881

# **Current Principal Place of Business:**

1 RIBERIA ST.

ST AUGUSTINE. FL 32084

## **Current Mailing Address:**

1 RIBERIA ST.

ST AUGUSTINE. FL 32084

FEI Number: 59-0432275 Certificate of Status Desired: No

## Name and Address of Current Registered Agent:

WENDLAND, KIRK 1 RIBERIA STREET ST. AUGUSTINE, FL 32084 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:

Electronic Signature of Registered Agent

Date

#### Officer/Director Detail:

Title P Title CHAIRMAN

NameWENDLAND, KIRKNameALEXANDER, DANAddress1 RIBERIA STAddressP. O. DRAWER 3807

City-State-Zip: ST. AUGUSTINE FL 32084 City-State-Zip: ST. AUGUSTINE FL 32085

Title VC Title SD

Name RAYMOS, VICTOR Name WISEMAN, LETHA
Address 1789 LAKESIDE AVE. Address P.O. DRAWER 3067

City-State-Zip: ST. AUGUSTINE FL 32084 City-State-Zip: ST. AUGUSTINE FL 32085

Title TD

Name NOIR-JONES, LUCIANO J.

Address 24 CATHEDRAL PLACE BLDG.

City-State-Zip: ST. AUGUSTINE FL 32084

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: KIRK WENDLAND

Electronic Signature of Signing Officer/Director Detail

**PRESIDENT** 

04/18/2013

Date