

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Aug 07, 2001 8:00 am
Secretary of State

08-07-2001 90018 049 ****61.25

DOCUMENT # 746554

1. Entity Name

PALM BEACH CHAMBER OF COMMERCE, INC.

Principal Place of Business

45 COCOANUT ROW
 PALM BEACH FL 33480

Mailing Address

45 COCOANUT ROW
 PALM BEACH FL 33480

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

Zip

Country

3. Mailing Address

Suite, Apt. #, etc.

City & State

Zip

Country

4. FEI Number

59-0389290

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required



DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

~~CLEARY, MARTHA C.~~
 45 COCOANUT ROW
 PALM BEACH FL 33480

7. Name and Address of New Registered Agent

Name

Laurel T. Baker

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

45 Cocoanut Row
 City Palm Beach

FL

Zip Code 33480

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.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW: FEE IS \$61.25

After September 12, 2001, min. will be \$236.25

9. Election Campaign Financing Trust Fund Contribution.

\$5.00 May Be Added to Fees

Make Check Payable to Department of State

10. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Delete
VD	MAUS, JOHN G.	312 WORTH AVE	PALM BCH FL	<input type="checkbox"/>
TD	LEONE, PAUL N CPA	THE BREAKERS, ONE SOUTH COUNTY ROAD	PALM BEACH FL 33480	<input type="checkbox"/>
P	NEWMAN, JESSE D	1515 N OCEAN WAY	PALM BCH FL	<input checked="" type="checkbox"/>
VP	BROOKS, WILLIAM J.	622 N FLAGLER DR	W PALM BCH FL	<input checked="" type="checkbox"/>
ED	CLEARY, MARTHA C.	45 COCOANUT ROW	PALM BCH FL	<input checked="" type="checkbox"/>
SD	SEMADENI, DAVID K.	230 ROYAL PALM WAY, STE 403	PALM BEACH FL 33480	<input type="checkbox"/>

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input checked="" type="checkbox"/> Change	<input type="checkbox"/> Addition
D				<input checked="" type="checkbox"/>	<input type="checkbox"/>
V/D				<input checked="" type="checkbox"/>	<input type="checkbox"/>
	Philip H. Whitacre V/D	44 Cocoanut Row	Palm Beach, FL 33480	<input type="checkbox"/>	<input checked="" type="checkbox"/>
	P/D	Pamela S. Hoffpauer	45 Cocoanut Row Palm Beach 33480	<input type="checkbox"/>	<input checked="" type="checkbox"/>
	ED	Laurel T. Baker	45 Cocoanut Row Palm Beach 33480	<input type="checkbox"/>	<input checked="" type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 REQUIRED

7/5/01

561.655.3282

CR2E037 (5/01)