

**2003 NOT-FOR-PROFIT CORPORATION  
UNIFORM BUSINESS REPORT (UBR)**

**FILED**  
**May 02, 2003 8:00 am**  
**Secretary of State**

05-02-2003 90396 028 \*\*\*\*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**



CHECK HERE IF MAKING CHANGES

2. Principal Place of Business		3. Mailing Address		4. FEI Number <b>59-0389290</b>		Applied For	
Suite, Apt. #, etc.		Suite, Apt. #, etc.				Not Applicable	
City & State		City & State		5. Certificate of Status Desired <input type="checkbox"/>		<b>\$8.75</b> Additional Fee Required	
Zip	Country	Zip	Country				

6. Name and Address of Current Registered Agent				7. Name and Address of New Registered Agent							
<b>BAKER, LAUREL T 45 COCOANUT ROW PALM BEACH FL 33480</b>				Name							
				Street Address (P.O. Box Number is Not Acceptable)							
				City				<b>FL</b>		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 Laurel T Baker **LAUREL T BAKER** **4/28/03**

Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

<b>FILE NOW: FEE IS \$61.25</b>	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>	<b>\$5.00</b> May Be Added to Fees	<b>Make Check Payable to Florida Department of State</b>
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10. OFFICERS AND DIRECTORS				11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10			
TITLE	<b>D</b>	<input type="checkbox"/> Delete		TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	<b>MAUS, JOHN G.</b>			NAME			
STREET ADDRESS	<b>312 WORTH AVE</b>			STREET ADDRESS			
CITY-ST-ZIP	<b>PALM BCH FL</b>			CITY-ST-ZIP			
TITLE	<b>VD</b>	<input type="checkbox"/> Delete		TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	<b>LEONE, PAUL N CPA</b>			NAME			
STREET ADDRESS	<b>THE BREAKERS, ONE SOUTH COUNTY ROAD</b>			STREET ADDRESS			
CITY-ST-ZIP	<b>PALM BEACH FL 33480</b>			CITY-ST-ZIP			
TITLE	<b>PD</b>	<input type="checkbox"/> Delete		TITLE		<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	
NAME	<b>WHITACRE, PHILIP H</b>			NAME			
STREET ADDRESS	<b>44 COCOANUT ROW</b>			STREET ADDRESS			
CITY-ST-ZIP	<b>PALM BEACH FL 33480</b>			CITY-ST-ZIP			
TITLE	<b>D</b>	<input type="checkbox"/> Delete		TITLE	<b>VICE PRESIDENT</b>	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	<b>SCAFF, DAVID H</b>			NAME			
STREET ADDRESS	<b>255 SOUTH COUNTY ROAD</b>			STREET ADDRESS			
CITY-ST-ZIP	<b>PALM BEACH FL 33480</b>			CITY-ST-ZIP			
TITLE	<b>ED</b>	<input type="checkbox"/> Delete		TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	<b>BAKER, LAUREL T</b>			NAME			
STREET ADDRESS	<b>45 COCOANUT ROW</b>			STREET ADDRESS			
CITY-ST-ZIP	<b>PALM BEACH FL 33480</b>			CITY-ST-ZIP			
TITLE	<b>D</b>	<input type="checkbox"/> Delete		TITLE	<b>TREASURER</b>	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	<b>THOMAS, DANA</b>			NAME			
STREET ADDRESS	<b>223 SUNSET AVENUE #200</b>			STREET ADDRESS			
CITY-ST-ZIP	<b>PALM BEACH FL 33480</b>			CITY-ST-ZIP			

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: Laurel T Baker **LAUREL T BAKER** **4/28/03** **561.655.3282**

CR2E037 (10/02)