

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra B. Northam
Secretary of State
DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

95 APR -3 PM 4: 28

DOCUMENT # P92000011606 (0)

1. Corporation Name

DOWNTOWN BOCA RATON CHAMBER OF COMMERCE, INC.

Principal Place of Business

POST OFFICE BOX 1390
1800 NORTH DIXIE HIGHWAY
BOCA RATON FL 33432

Mailing Address

POST OFFICE BOX 1390
1800 NORTH DIXIE HIGHWAY
BOCA RATON FL 33432

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified 12/11/1992	3a. Date of Last Report 05/01/1994
4. FBI Number APPLIED FOR 65049 5615	Applied For Not Applicable
5. Certificate of Status Desired ☐	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐	\$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☐ Yes ☐ No	

2. Principal Place of Business	2a. Mailing Address
21 Suite, Apt. #, etc.	26 Suite, Apt. #, etc.
22 City & State	27 City & State
23 Zip	28 Zip
24 Country	29 Country

9. Name and Address of Current Registered Agent

ARTS, M J
1800 NORTH DIXIE HIGHWAY
BOCA RATON FL 33432

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City
85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

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

(NOTE: Registered Agent signature required when reappointing)

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	S	1.1 TITLE	SD
NAME	M.J. MIKE ARTS	1.2 NAME	M. J. "Mike" Arts
STREET ADDRESS	1800 N DIXIE HWY	1.3 STREET ADDRESS	Boca Raton Chamber of Commerce
CITY-ST-ZIP	BOCA RATON FL	1.4 CITY-ST-ZIP	1800 N. Dixie Highway Boca Raton, FL 33432
TITLE	D	2.1 TITLE	John Hannifan
NAME	THAYER, WANDA	2.2 NAME	IBM
STREET ADDRESS	159 NORTHWEST 11TH STREET	2.3 STREET ADDRESS	1000 NW 51st St - 1006
CITY-ST-ZIP	BOCA RATON FL 33432	2.4 CITY-ST-ZIP	Boca Raton, FL 33432
TITLE	VD	3.1 TITLE	Richard Murdoch
NAME	PHILLIP MODDER	3.2 NAME	Dickenson, Murdoch, Rex & Sloan
STREET ADDRESS	805 E HILLSBORO BLVD, 102	3.3 STREET ADDRESS	980 N Federal Hwy, #410
CITY-ST-ZIP	DEERFIELD BEACH FL	3.4 CITY-ST-ZIP	Boca Raton, FL 33432
TITLE	D	4.1 TITLE	William Hager
NAME	BARR, JAMES	4.2 NAME	N.C.C.I.
STREET ADDRESS	1450 NW 1 AVE	4.3 STREET ADDRESS	750 Park of Commerce Dr
CITY-ST-ZIP	BOCA RATON FL	4.4 CITY-ST-ZIP	Boca Raton, FL 33487
TITLE	T	5.1 TITLE	James Barr
NAME	SCHMIDT, SANDRA	5.2 NAME	Boca Raton Transportation
STREET ADDRESS	2499 GLADES RD #312	5.3 STREET ADDRESS	1700 Florida Mango Rd
CITY-ST-ZIP	BOCA RATON FL	5.4 CITY-ST-ZIP	West Palm Beach, FL 33409
TITLE	D	6.1 TITLE	Philip Modder
NAME	HANNIFAN, JOHN	6.2 NAME	Southern Security Bank Corp.
STREET ADDRESS	1000 NW 51 ST #1008	6.3 STREET ADDRESS	805 E Hillsboro Blvd, #102
CITY-ST-ZIP	BOCA RATON FL	6.4 CITY-ST-ZIP	Deerfield Beach, FL 33441

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the protection afforded by Sections 119.07(3)(b), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

M J Arts
SIGNATURE, TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/28/95
DATE

Signature (Name)