2006 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT

FILED
Oct 24, 2006
Secretary of State

DOCUMENT# 751011

Entity Name: CORAL GABLES CHAMBER OF COMMERCE, INC.

Current Principal Place of Business:

224 CATALONIA AVE
CORAL GABLES, FL 33134

New Principal Place of Business:

Current Mailing Address:

224 CATALONIA AVE
CORAL GABLES, FL 33134

New Mailing Address:

FEI Number: 59-0205525 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

GONZALEZ, ANA M
224 CATALONIA AVE
CORAL GABLES, FL 33134 US

Name and Address of New Registered Agent:

TROWBRIDGE, MARK A
224 CATALONIA AVE
CORAL GABLES, FL 33134 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: MARK A. TROWBRIDGE 10/24/2006
Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: PD ( ) Delete
Name: GONZALEZ, ANA M
Address: 224 CATALONIA AVE
City-St-Zip: CORAL GABLES, FL 33134

Title: D ( ) Delete
Name: BAINBRIDGE, GAYLE
Address: 224 CATALONIA AVE
City-St-Zip: CORAL GABLES, FL 33134

Title: D ( ) Delete
Name: ALEXANDER, CAROL
Address: 224 CATALONIA AVE.
City-St-Zip: CORAL GABLES, FL 33134

Title: D ( ) Delete
Name: BARRERA, SERGIO
Address: 224 CATALONIA AVENUE
City-St-Zip: CORAL GABLES, FL 33134

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition
Name: TROWBRIDGE, MARK A
Address: 224 CATALONIA AVE
City-St-Zip: CORAL GABLES, FL 33134

Title: D (X) Change ( ) Addition
Name: GONZALEZ, PEDRO
Address: 224 CATALONIA AVE
City-St-Zip: CORAL GABLES, FL 33134

Title: D (X) Change ( ) Addition
Name: RENDEIRO, CAROLINA
Address: 224 CATALONIA AVE.
City-St-Zip: CORAL GABLES, FL 33134

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: MARK A. TROWBRIDGE PRES 10/24/2006
Electronic Signature of Signing Officer or Director Date