

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N97000004954

FILED
Apr 09, 2009
Secretary of State

Entity Name: NORTHERN PALM BEACH COUNTY CHAMBER OF COMMERCE FOUNDATION, INC.

Current Principal Place of Business:

800 NORTH US HWY ONE
JUPITER, FL 33477

New Principal Place of Business:

Current Mailing Address:

800 NORTH US HWY ONE
JUPITER, FL 33477

New Mailing Address:

FEI Number: 65-0784996

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CHRISTIAN, NICOLE
800 N. US HWY ONE
JUPITER, FL 33477 US

Name and Address of New Registered Agent:

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

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: CARDONE, NANCY
Address: 300 W INDIANTOWN ROAD
City-St-Zip: JUPITER, FL 33458

Title: O () Delete
Name: KENNERLY, KENNETH R
Address: 631 US HWY ONE, SUITE 410
City-St-Zip: N. PALM BEACH, FL 33408

Title: T () Delete
Name: CHRISTIAN, NICOLE
Address: 800 N. US HWY ONE
City-St-Zip: JUPITER, FL 33477

Title: VP () Delete
Name: MONTGOMERY, KEN
Address: 6231 WOOD LAKE ROAD
City-St-Zip: JUPITER, FL 33458

Title: S () Delete
Name: D'AMICO, PHILLIP
Address: 5150 117TH CT N.
City-St-Zip: PALM BEACH GARDENS, FL 33418

Title: O () Delete
Name: HOLMES, MARK
Address: 393 TEQUESTA DRIVE
City-St-Zip: TEQUESTA, FL 33469

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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Name:
Address:
City-St-Zip:

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City-St-Zip:

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Address:
City-St-Zip:

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

I hereby certify that the information supplied with this filing does not qualify 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: NICOLE CHRISTIAN

T

04/09/2009

Electronic Signature of Signing Officer or Director

Date