## 2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

**DOCUMENT# 740636** 

Entity Name: STUART/MARTIN COUNTY CHAMBER OF COMMERCE, INC.

**FILED** Jan 10, 2017 **Secretary of State** CC4662420221

## **Current Principal Place of Business:**

1650 S KANNER HIGHWAY STUART, FL 34994

## **Current Mailing Address:**

1650 S KANNER HIGHWAY STUART, FL 34994 US

FEI Number: 59-0684483 Certificate of Status Desired: Yes

## Name and Address of Current Registered Agent:

CATRAMBONE, JOSEPH A 1650 S KANNER HIGHWAY STUART, FL 34994 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:

Address

Electronic Signature of Registered Agent

Date

Officer/Director Detail:

Title DIRECTOR Title **PCEO** 

STROM, RYAN Name Name CATRAMBONE, JOSEPH A.

Address

1650 S. KANNER HWY

611 S.E. PALM BEACH ROAD

City-State-Zip: STUART FL 34994 STUART FL 34994 City-State-Zip:

Title **CHAIRMAN** Title Т

Name NORMAN, JANICE Name PROCTOR, GORDON 660 N.E. OCEAN BLVD. Address Address 33 FLAGLER AVENUE

STUART FL 34996 City-State-Zip: STUART FL 34994 City-State-Zip:

Title VC VC Title

Name GLUCKMAN, ROB Name CARSON, WILLIAM

Address 1050 S.E. MONTEREY ROAD, SUITE 4437 S.W. PORT WAY Address 101

STUART FL 34990

City-State-Zip: City-State-Zip: STUART FL 34994

Title

BOND PELLETIER, KELLY Name 2691 S.E. OCEAN BLVD. Address

STUART FL 34996 City-State-Zip:

I hereby 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 all other like empowered.

SIGNATURE: JOSEPH A. CATRAMBONE

PRES/CEO

01/10/2017