

2023 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 751011

Entity Name: CORAL GABLES CHAMBER OF COMMERCE, INC.**Current Principal Place of Business:**201 ALHAMBRA CIRCLE
#100
CORAL GABLES, FL 33134**Current Mailing Address:**201 ALHAMBRA CIRCLE
#100
CORAL GABLES, FL 33134 US**FEI Number:** 59-0205525**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**TROWBRIDGE, MARK A
201 ALHAMBRA CIRCLE
#100
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:**

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title PRESIDENT, DIRECTOR
Name TROWBRIDGE, MARK A
Address 201 ALHAMBRA CIRCLE
 #100
City-State-Zip: CORAL GABLES FL 33134

Title DIRECTOR
Name CHAOUI, ANA
Address 201 ALHAMBRA CIRCLE
 #100
City-State-Zip: CORAL GABLES FL 33134

Title DIRECTOR
Name HERNANDEZ, SARA M.
Address 201 ALHAMBRA CIRCLE
 #100
City-State-Zip: CORAL GABLES FL 33134

Title DIRECTOR
Name ADAMS, THAD
Address 201 ALHAMBRA CIRCLE
 #100
City-State-Zip: CORAL GABLES FL 33134

Title TREASURER
Name OTERO, AUDREY
Address 201 ALHAMBRA CIRCLE
 #100
City-State-Zip: CORAL GABLES FL 33134

Title DIRECTOR
Name KURLA, ADDYS
Address 201 ALHAMBRA CIRCLE
 #100
City-State-Zip: CORAL GABLES FL 33134

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: MARK A. TROWBRIDGE**PRESIDENT****01/09/2023**

Electronic Signature of Signing Officer/Director Detail

Date