#### **2023 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N02000006603

Entity Name: WOMEN'S CHAMBER FOUNDATION, INC.

**FILED** Jan 28, 2023 Secretary of State 8928222231CC

# **Current Principal Place of Business:**

400 HIBISCUS STREET, SUITE 200-WEST

WEST PALM BEACH, FL 33401

## **Current Mailing Address:**

400 HIBISCUS STREET, SUITE 200-WEST WEST PALM BEACH. FL 33401 US

FEI Number: 06-1644156 Certificate of Status Desired: No

#### Name and Address of Current Registered Agent:

BLOOM, JANE C 400 HIBISCUS STREET, SUITE 200-WEST WEST PALM BEACH, FL 33401 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: JANE C. BLOOM 01/28/2023

Electronic Signature of Registered Agent

Date

# Officer/Director Detail:

Title IMMEDIATE PAST PRESIDENT Title **PRESIDENT** 

MATERIO, SHANON SHULL, DANIELLE Name Name

Address 400 HIBISCUS STREET, SUITE 200-Address 400 HIBISCUS STREET, SUITE 200-WEST

WEST

City-State-Zip: WEST PALM BEACH FL 33401 City-State-Zip: WEST PALM BEACH FL 33401

Title DIRECTOR Title **TREASURER** Name SHEPPARD, CINDY Name BLOOM, JANE

400 HIBISCUS STREET, SUITE 200-400 HIBISCUS STREET, SUITE 200-Address Address

WEST WEST

WEST PALM BEACH FL 33401 City-State-Zip: WEST PALM BEACH FL 33401 City-State-Zip:

Title **SECRETARY** Title **DIRECTOR** 

Name CORSI, DIANE Name LEPORE, THERESA

400 HIBISCUS STREET, SUITE 200-Address 400 HIBISCUS STREET, SUITE 200-Address

WEST WEST

City-State-Zip: WEST PALM BEACH FL 33401 City-State-Zip: WEST PALM BEACH FL 33401

Title **DIRECTOR** Title **DIRECTOR** 

DAVIS, JANIECE GILBERT, SHERRI Name Name

Address 400 HIBISCUS STREET, SUITE 200-Address 400 HIBISCUS STREET, SUITE 200-

WEST WEST

WEST PALM BEACH FL 33401 City-State-Zip: WEST PALM BEACH FL 33401 City-State-Zip:

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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.

01/28/2023 SIGNATURE: JANE C. BLOOM TREASURER

Electronic Signature of Signing Officer/Director Detail

Date

#### Officer/Director Detail Continued:

DIRECTOR Title VP Title

Name TURNER, SUZANNE Name MONTALVO, MARGARET

Address 400 HIBISCUS STREET, SUITE 200-WEST Address 400 HIBISCUS STREET, SUITE 200-

WEST

City-State-Zip: WEST PALM BEACH FL 33401 WEST PALM BEACH FL 33401 City-State-Zip:

DIRECTOR Title

Name

O'MAHONEY, EMILY Name

Name GONZALEZ, HILDA 400 HIBISCUS STREET, SUITE 200-WEST Address

Address 400 HIBISCUS STREET, SUITE 200-City-State-Zip: WEST PALM BEACH FL 33401

WEST

WEST PALM BEACH FL 33401 City-State-Zip: Title DIRECTOR

Title **DIRECTOR** DEL SOL, ALYSSA

Name KESSELL, SHANNON 400 HIBISCUS STREET, SUITE 200-WEST Address

Address 400 HIBISCUS STREET, SUITE 200-City-State-Zip: WEST PALM BEACH FL 33401

WEST

DIRECTOR

City-State-Zip: WEST PALM BEACH FL 33401

Title