2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000006603

Entity Name: WOMEN'S CHAMBER FOUNDATION, INC.

FILED Feb 06, 2017 Secretary of State CC0156290565

Current Principal Place of Business:

400 HIBISCUS STREET

WEST PALM BEACH. FL 33401

Current Mailing Address:

400 HIBISCUS STREET

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 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 02/06/2017

Electronic Signature of Registered Agent

Date

Officer/Director Detail:

Title CHAIRMAN Title VC

NameALBRITTON, DENISENameVESTRICH, LESLEYAddress400 HIBISCUS STREETAddress400 HIBISCUS STREET

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

TitleSECRETARYTitleTREASURERNameDAVIS JOHNSON, TONYANameBLOOM, JANE

Address 400 HIBISCUS STREET Address 400 HIBISCUS STREET

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

Title DIRECTOR Title DIRECTOR

Name LEPORE, THERESA Name ASHE, MAUREEN

Address 400 HIBISCUS STREET Address 400 HIBISCUS STREET

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

TitleDIRECTORTitleDIRECTORNameKAPLAN, DEBBIENameGILL, SHARON

Address 400 HIBISCUS STREET Address 400 HIBISCUS STREET

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

Continues on page 2

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: JANE C. BLOOM TREASURER 02/06/2017

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued:

Title **DIRECTOR**

Name LEWIS, MONICA

400 HIBISCUS STREET Address

City-State-Zip: WEST PALM BEACH FL 33401

Title DIRECTOR

Address

ROGERS, RHONDA Name 400 HIBISCUS STREET

City-State-Zip: WEST PALM BEACH FL 33401

Title DIRECTOR

BENSON WYMER, BARBARA Name

Address 400 HIBISCUS STREET

City-State-Zip: WEST PALM BEACH FL 33401

Title DIRECTOR

Name MOFFETT, MARY

400 HIBISCUS STREET Address

City-State-Zip: WEST PALM BEACH FL 33401

Title DIRECTOR

Name SHEPPARD, CINDY

Address 400 HIBISCUS STREET

City-State-Zip: WEST PALM BEACH FL 33401