

2017 FLORIDA NOT FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N10000007962

FILED
Apr 27, 2017
Secretary of State
CR8438335967

Entity Name: MONROE COUNTY CHAMBER OF COMMERCE, INC.

Current Principal Place of Business:

2000 WEST COMMERCIAL BLVD SUITE 229
FORT LAUDERDALE, FL 33309

Current Mailing Address:

2000 WEST COMMERCIAL BLVD SUITE 229
FORT LAUDERDALE, FL 33309 US

FEI Number: NOT APPLICABLE

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

WILLIAMS, LEVI G
200 SE 13TH ST.
FORT LAUDERDALE, FL 33316 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: LEVI WILLIAMS

04/27/2017

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title P
Name ZOLNOWSKI, LAWRENCE A
Address 2425 EAST COMMERCIAL BLVD.
SUITE 103
City-State-Zip: FORT LAUDERDALE FL 33308

Title VP
Name ZOLNOWSKI, TERESA E
Address 2425 EAST COMMERCIAL BLVD SUITE
103
City-State-Zip: FORT LAUDERDALE FL 33308

Title AVP
Name WILKENS, JOE
Address 2425 EAST COMMERCIAL BLVD.
SUITE 103
City-State-Zip: FORT LAUDERDALE FL 33308

Title DIRECTOR
Name HAAG, SHAWN
Address 2000 WEST COMMERCIAL BLVD
SUITE 229
City-State-Zip: FORT LAUDERDALE FL 33309

Title DIRECTOR
Name KUGELMAN, MARTY
Address 2000 WEST COMMERCIAL BLVD
SUITE 229
City-State-Zip: FORT LAUDERDALE FL 33309

Title DIRECTOR
Name KENNEDY, TIMOTHY
Address 2000 WEST COMMERCIAL BLVD
SUITE 229
City-State-Zip: FORT LAUDERDALE FL 33309

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: LAWRENCE ZOLNOWSKI

PRESIDENT

04/27/2017

Electronic Signature of Signing Officer/Director Detail

Date