

**2019 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N14000000273

**FILED**  
**Apr 29, 2019**  
**Secretary of State**  
**9930991046CC**

**Entity Name:** VERO BEACH CHAMBER OF COMMERCE INC.

**Current Principal Place of Business:**

1957 14TH AVENUE  
VERO BEACH, FL 32960

**Current Mailing Address:**

1957 14TH AVENUE  
VERO BEACH, FL 32960

**FEI Number:** 38-3923205

**Certificate of Status Desired:** No

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

MCCABE, ROBERT J  
1957 14TH AVENUE  
VERO BEACH, FL 32960 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:** ROBERT J. MCCABE

04/29/2019

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title DIRECTOR, PRESIDENT  
Name MCCABE, ROBERT J.  
Address 1957 14TH AVENUE  
City-State-Zip: VERO BEACH FL 32960

Title DIRECTOR, VP  
Name MOSHIER, DAVID  
Address 3116 EAGLE DRIVE  
City-State-Zip: VERO BEACH FL 32963

Title DIRECTOR, SECRETARY  
Name AVERY, DEBBIE  
Address 233 ARBOR LANE  
City-State-Zip: VERO BEACH FL 32960

Title DIRECTOR, TREASURER  
Name BURTON, JANE  
Address 1657 14TH AVE  
City-State-Zip: VERO BEACH FL 32960

Title DIRECTOR  
Name ENDERSON, SANDY  
Address 4125 20TH STREET  
City-State-Zip: VERO BEACH FL 32960

Title DIRECTOR  
Name BROWN, TONY  
Address 1285 US HIGHWAY 1  
City-State-Zip: VERO BEACH FL 32960

Title DIRECTOR  
Name FINNEY, SCOTT  
Address 1957 14TH AVE  
City-State-Zip: VERO BEACH FL 32960

Title DIRECTOR  
Name MCGEE, ALEX  
Address 3333 20TH STREET  
City-State-Zip: VERO BEACHJ FL 32960

**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:** ROBERT J MCCABE

**PRESIDENT**

04/29/2019

Electronic Signature of Signing Officer/Director Detail

Date

**Officer/Director Detail Continued :**

Title DIRECTOR  
Name NICHOLSON, TINA  
Address 1450 US HIGHWAY 1  
City-State-Zip: VERO BEACH FL 32960

Title DIRECTOR  
Name SELLERS, GORDON  
Address 1925 14TH AVENUE  
City-State-Zip: VERO BEACH FL 32960

Title DIRECTOR  
Name OOLEY, ANGIE  
Address 3375 20TH STREET  
City-State-Zip: VERO BEACH FL 32960

Title DIRECTOR  
Name GRANT, STATON  
Address 1015 9TH LANE  
City-State-Zip: VERO BEACH FL 32960