

2021 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N93000000027

Entity Name: THE CHAMBER FOUNDATION, INC.**Current Principal Place of Business:**1425 E. VINE STREET
KISSIMMEE, FL 34744**Current Mailing Address:**1425 E. VINE STREET
KISSIMMEE, FL 34744**FEI Number:** 59-3183973**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**NEWSTREET, JOHN D
1425 E VINE STREET
KISSIMMEE, FL 34744 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:** JOHN D NEWSTREET

02/15/2021

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title DIRECTOR
Name BAKER, KEN
Address 111 E MONUMENT AVE SUITE 309
City-State-Zip: KISSIMMEE FL 34741

Title DIRECTOR
Name MERCER, ATLEE
Address 1585 THE OAKS BLVD
City-State-Zip: KISSIMMEE FL 34746

Title VICE CHAIRMAN FINANCE
Name TOUMAZOS, DIMITRI
Address 7575 DR. PHILLIPS BLVD SUITE 260
City-State-Zip: ORLANDO FL 32819

Title DIRECTOR
Name WHITE, TOM
Address 625 N. CENTRAL AVENUE
City-State-Zip: KISSIMMEE FL 34741

Title DIRECTOR
Name THACKER, JO
Address 390 NORTH ORANGE AVENUE
1400
City-State-Zip: ORLANDO FL 32801

Title DIRECTOR
Name CLEMENTS, DEBBIE
Address 605 DARTMOUTH STREET
City-State-Zip: ORLANDO FL 32804

Title DIRECTOR
Name NEWSTREET, JOHN
Address 1425 E VINE STREET
City-State-Zip: KISSIMMEE FL 34744

Title CHAIRMAN
Name COOPER, MARY
Address 917 EMMETT STREET
City-State-Zip: KISSIMMEE FL 34741

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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.

SIGNATURE: JOHN NEWSTREET

DIRECTOR

02/15/2021

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title DIRECTOR
Name FRAZIER-KENNEY, KATHY
Address 1425 E. VINE STREET
City-State-Zip: KISSIMMEE FL 34744

Title DIRECTOR
Name SEKULA, ADRIANNA
Address 1375 BUENA VISTA DRIVE
City-State-Zip: ORLANDO FL 32830

Title DIRECTOR
Name SANTAMARIA, VICKY
Address 2450 N ORANGE BLOSSOM TRAIL
City-State-Zip: KISSIMMEE FL 34744