2006 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# 701594

FILED Jan 04, 2006 Secretary of State

Entity Name: GREATER LANTANA CHAMBER OF COMMERCE, INC.

Current Principal Place of Business: New Principal Place of Business:

212 IRIS AVENUE

LANTANA, FL 334623219 US

Current Mailing Address: New Mailing Address:

212 IRIS AVENUE

LANTANA, FL 334623219 US

FEI Number: 56-0961687 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

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

MATTHEWS, LISA

LUMBERT, DAVID

212 IRIS AVENUE

212 IRIS AVENUE

LANTANA, FL 33462 US LANTANA, FL 33462 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: DAVID LUMBERT 01/04/2006

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Fitle: D () Delete Title: D (X) Change () Addition

 Name:
 MATTHEWS, LISA
 Name:
 LUMBERT, DAVID

 Address:
 212 IRIS AVE
 Address:
 212 IRIS AVE

 City-St-Zip:
 LANTANA, FL 33462
 City-St-Zip:
 LANTANA, FL 33462

Title: D () Delete Title: D (X) Change () Addition

Name: JOHNSON, CHRIS Name: DOLLING, CORY
Address: 212 IRIS AVE Address: 212 IRIS AVE

City-St-Zip: LAKE WORTH, FL 33462 City-St-Zip: LAKE WORTH, FL 33462

Title: D () Delete Title: () Change () Addition

 Name:
 WASHAM, RON
 Name:

 Address:
 212 IRIS AVE
 Address:

 City-St-Zip:
 HYPOLUXO, FL 33462
 City-St-Zip:

 $\label{eq:title:D} {\sf Title:} \qquad {\sf D} \qquad {\sf () Delete} \qquad \qquad {\sf Title:} \qquad {\sf D} \qquad {\sf (X) Change () Addition}$

 Name:
 MCGRAW, TIM
 Name:
 TAYLOR, DAVID

 Address:
 212 IRIS AVEN
 Address:
 212 IRIS AVEN

 City-St-Zip:
 LANTANA, FL 33462
 City-St-Zip:
 LANTANA, FL 33462

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: DAVID LUMBERT D 01/04/2006