

2012 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT**FILED**
Oct 11, 2012
Secretary of State

DOCUMENT# 703450

Entity Name: ISLAMORADA CHAMBER OF COMMERCE, INC.**Current Principal Place of Business:**83224 OVERSEAS HWY
ISLAMORADA, FL 33036**New Principal Place of Business:****Current Mailing Address:**P.O. BOX 915
ISLAMORADA, FL 33036**New Mailing Address:****FEI Number:** 59-1031258**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**HULL, JUDY
83224 OVERSEAS HWY
ISLAMORADA, FL 33036 US**Name and Address of New Registered Agent:**

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: _____

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P
Name: STOBER, ROB
Address: 90130 OLD HIGHWAY
City-St-Zip: TAVERNIER, FL 33070

Title: S
Name: SCUDERI, STEPHANIE
Address: PO BOX 370532
City-St-Zip: KEY LARGO, FL 33037

Title: V
Name: ROTH, JOE JR
Address: 90144 OVERSEAS HIGHWAY
City-St-Zip: TAVERNIER, FL 33070

Title: T
Name: KINKELAAR, ED
Address: 133 PALM LN.
City-St-Zip: ISLAMORADA, FL 33036

Title: D
Name: LUNDGREN, KARA
Address: 80001 OVERSEAS HIGHWAY
City-St-Zip: ISLAMORADA, FL 33036

Title: PP
Name: SMITH, CALE
Address: 209 PALM AVE
City-St-Zip: ISLAMORADA, FL 33036

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: JUDY HULL

ED

10/11/2012

Electronic Signature of Signing Officer or Director

Date