

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 712522

FILED
Mar 15, 2006
Secretary of State

Entity Name: COCOA BEACH AREA CHAMBER OF COMMERCE, INC.

Current Principal Place of Business:

400 FORTENBERRY RD
MERRITT ISLAND, FL 32952

New Principal Place of Business:

Current Mailing Address:

400 FORTENBERRY RD
MERRITT ISLAND, FL 32952

New Mailing Address:

FEI Number: 59-0903980

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SCHILLO, KATHLEEN L
400 FORTENBERRY RD
MERRITT ISLAND, FL 32952 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 () Delete
Name: SCHILLO, KATHLEEN L
Address: 400 FORTENBERRY RD
City-St-Zip: MERRITT ISLAND, FL

Title: T () Delete
Name: ROSELLE, LARRY
Address: 655 AMERICANA BLVD NW
City-St-Zip: PALM BAY, FL 32907

Title: D () Delete
Name: PORTER, JOHN
Address: 1325 N ATLANTIC AVE SUITE #304
City-St-Zip: COCOA BEACH, FL 32931

Title: D () Delete
Name: VESTER, JANE
Address: PO BOX 585
City-St-Zip: COCOA, FL 32932

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: T (X) Change () Addition
Name: HARRIS, RICHARD
Address: 1485 VEGA AVE
City-St-Zip: MERRITT ISLAND, FL 32953

Title: D (X) Change () Addition
Name: COPP, DAVID
Address: 331 TUNBRIDGE DR
City-St-Zip: ROCKLEDGE, FL 32955

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: KATHLEEN L SCHILLO

P

03/15/2006

Electronic Signature of Signing Officer or Director

Date