

FILE NOW: FILING FEE IS \$61.25

NONPROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 721601 (3)

1. Corporation Name

GREATER DELRAY BEACH CHAMBER OF COMMERCE, INC.



Principal Place of Business

Mailing Address

CHAMBER OF COMMERCE INC
64 SE FIFTH AVE
DELRAY BEACH FL 33483-5302

CHAMBER OF COMMERCE INC
64 SE FIFTH AVE
DELRAY BEACH FL 33483-5302

3. Date Incorporated or Qualified

08/30/1971

3a. Date of Last Report

05/01/1995

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip Country

28 Zip Country

24

29 30

4. FEI Number

59-0581716

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

WOOD, WILLIAM J.
64 SE 5TH AVE
DELRAY BEACH FL 33483

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title, if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE C
NAME JANARO, JERRY
STREET ADDRESS 5858 HERITAGE PARK WAY
CITY-ST-ZIP DELRAY BCH, FL 0 ☐ DELETE

TITLE VD
NAME BROW, BONNIE
STREET ADDRESS 915 HIBISCUS LANE
CITY-ST-ZIP DELRAY BEACH FL ☐ DELETE

TITLE V
NAME TITCOMB, JAMIE
STREET ADDRESS 3842 OLD N DIXIE HWY
CITY-ST-ZIP DELRAY BEACH FL ☐ DELETE

TITLE DV
NAME HENNINGER, DAVE
STREET ADDRESS 101-D S CONGRESS AVE.
CITY-ST-ZIP DELRAY BEACH FL ☐ DELETE

TITLE DC
NAME HAYES, BOB
STREET ADDRESS 181 SE 5TH AVE
CITY-ST-ZIP DELRAY BEACH FL ☒ DELETE

TITLE P
NAME WOOD, WILLIAM J.
STREET ADDRESS 64 SE 5TH AVE
CITY-ST-ZIP DELRAY BEACH FL ☐ DELETE

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE

D

IMMEDIATE PAST CHAIRMAN

☒ Change ☐ Addition

12 NAME

JANARO, JERRY

5858 HERITAGE PARK WAY

13 STREET ADDRESS

DELRAY BEACH FL

33483 ☐ Change ☐ Addition

14 CITY-ST-ZIP

21 TITLE

VD

☐ Change ☐ Addition

22 NAME

23 STREET ADDRESS

24 CITY-ST-ZIP

31 TITLE

VD

VICE CHAIRMAN

☒ Change ☐ Addition

32 NAME

TITCOMB, JAMES

3842 OLD N DIXIE HWY.

33 STREET ADDRESS

DELRAY BEACH FL

33483 ☐ Change ☐ Addition

34 CITY-ST-ZIP

41 TITLE

DC

CHAIRMAN

☒ Change ☐ Addition

42 NAME

HENNINGER, DAVE

101-D S CONGRESS AVE

43 STREET ADDRESS

DELRAY BEACH FL

33483 ☐ Change ☐ Addition

44 CITY-ST-ZIP

51 TITLE

VD

VICE CHAIRMAN

☐ Change ☒ Addition

52 NAME

SHEREMETA, DICK

101 SE 6TH AVE

53 STREET ADDRESS

DELRAY BEACH FL

33483 ☐ Change ☐ Addition

54 CITY-ST-ZIP

61 TITLE

62 NAME

63 STREET ADDRESS

64 CITY-ST-ZIP

000001863240
-06/17/96--01022--007
***01-25
05-01-96 OR

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation; the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if change, or

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (12/95)