2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT#750882

FILED Jan 05, 2007 Secretary of State

Entity Name: GREATER LAKE WORTH CHAMBER OF COMMERCE, INC.

Current Principal Place of Business: New Principal Place of Business: 501 LAKE AVE LAKE WORTH, FL 33460 LIS **Current Mailing Address: New Mailing Address:** 501 LAKE AVE LAKE WORTH, FL 33460 US FEI Number: 59-0324308 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: RAMICCIO, TOM 501 LAKE AVE LAKE WORTH, FL 33460 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: Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: **PRES** (X) Change () Addition () Delete RAMICCIO, TOM RAMICCIO, TOM Name: Name: 501 LAKE AVENUE Address: 501 LAKE AVENUE Address: City-St-Zip: LAKE WORTH, FL 33460 City-St-Zip: LAKE WORTH, FL 33460 Title: () Delete Title: **PSTC** (X) Change () Addition MANNING, ROGER Name: MANNING, ROGER Name: Address: 128 S. DIXIE HWY Address: 1937 10TH AVE N City-St-Zip: LAKE WORTH, FL 33460 City-St-Zip: LAKE WORTH, FL 33460 Title: VC () Delete Title: CHR (X) Change () Addition PERRIN, DAN PERRIN, DAN Name: Name: Address: **3041 KIRK RD** Address: **3041 KIRK RD** City-St-Zip: LAKE WORTH, FL 33460 City-St-Zip: LAKE WORTH, FL 33460 Title: VC () Delete Title: 1VC (X) Change () Addition STSERNVAY, ROGER Name: Name: STJERNVALL, ROGER Address: 702 LAKESIDE DR Address: 702 LAKESIDE DR City-St-Zip: LAKE WORTH, FL 33460 City-St-Zip: LAKE WORTH, FL 33460 Title: () Delete Title: () Change (X) Addition IQBAL, JAVAID Name: Name: 2215 N MILITARY TRAIL Address: Address: City-St-Zip: City-St-Zip: WEST PALM BEACH, FL 33409 Title: () Delete Title: () Change (X) Addition SILIO ROB Name: Name: Address: Address: 1194 OLD DIXIE HWY, STE 15 LAKE PARK, FL 33403 City-St-Zip: 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: TOM RAMICCIO CEO 01/05/2007