

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000004526

FILED
Apr 06, 2009
Secretary of State

Entity Name: CHAMBER EDUCATION FOUNDATION, INC.

Current Principal Place of Business:

1005 E. STRAWBRIDGE AVE.
MELBOURNE, FL 32901

New Principal Place of Business:

Current Mailing Address:

1005 E. STRAWBRIDGE AVE.
MELBOURNE, FL 32901

New Mailing Address:

FEI Number: 59-3660842

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MEYER, SHANNON
1005 E. STRAWBRIDGE AVE.
MELBOURNE, FL 32901 US

Name and Address of New Registered Agent:

MICHAELS, CHRISTINE
1005 E. STRAWBRIDGE AVE.
MELBOURNE, FL 32901 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: CHRISTINE MICHAELS

04/06/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: M () Delete
Name: BALLARD, DEBORAH
Address: 1005 E STRAWBRIDGE AVE
City-St-Zip: MELBOURNE, FL 32901

Title: VCD () Delete
Name: KINBERG, EDWARD J
Address: 2101 S. WAVERLY AVE., STE. 200E
City-St-Zip: MELBOURNE, FL 32901

Title: SD () Delete
Name: SANDERSON, LEONARD JR.
Address: 9001 ELLIS RD.
City-St-Zip: WEST MELBOURNE, FL 329041017

Title: TD () Delete
Name: BROWN, KIM
Address: 394 E DR
City-St-Zip: MELBOURNE, FL 32904

Title: D () Delete
Name: BOYD, JOEL
Address: 709 S HARBOR CITY BLVD 230
City-St-Zip: MELBOURNE, FL 32940

Title: D () Delete
Name: MEYER, SHANNON
Address: 100 SE STRAWBRIDGE AVE.
City-St-Zip: MELBOURNE, FL 32901

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: C (X) Change () Addition
Name: CORCORAN, MICHAEL
Address: 1331 SOUTH HARBOR CITY BLVD
City-St-Zip: MELBOURNE, FL 32901

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

Title: D (X) Change () Addition
Name: WALL, BARBARA
Address: 2000 S HWY A1A
City-St-Zip: INDIAN HARBOR BEACH, FL 32937

Title: D (X) Change () Addition
Name: SIMS, WILSON
Address: 3930 N. RIVERSIDE DRIVE
City-St-Zip: INDIALANTIC, FL 32903

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

Title: D (X) Change () Addition
Name: MICHAELS, CHRISTINE
Address: 1005 E. STRAWBRIDGE AVE.
City-St-Zip: MELBOURNE, FL 32901

I hereby certify that the information supplied with this filing does not qualify 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: CHRISTINE MICHAELS

D

04/06/2009

Electronic Signature of Signing Officer or Director

Date