

2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

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FILED
Feb 01, 2010
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:

MICHAELS, CHRISTINE
1005 E. STRAWBRIDGE AVE.
MELBOURNE, FL 32901 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: C
Name: BECKNER, ROBERT
Address: 1398 S. BABCOCK STREET
City-St-Zip: MELBOURNE, FL 32901

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

Title: D
Name: WALL, BARBARA
Address: 2000 S HWY A1A
City-St-Zip: INDIAN HARBOUR BEACH, FL 32937

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

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

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

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: CHRISTINE MICHAELS

D

02/01/2010

Electronic Signature of Signing Officer or Director

Date