

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 05, 2006
Secretary of State

DOCUMENT# N00623

Entity Name: THE GREATER NORTH MIAMI CHAMBER OF COMMERCE, INC.

Current Principal Place of Business:

13100 WEST DIXIE HIGHWAY
NORTH MIAMI, FL 331614131

New Principal Place of Business:

Current Mailing Address:

13100 WEST DIXIE HIGHWAY
NORTH MIAMI, FL 331614131

New Mailing Address:

FEI Number: 59-0642080 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

DOROTHY D VALENTINE
13100 W DIXIE HWY
NORTH MIAMI, FL 33161 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 () Delete
Name: KEYS, CAROL
Address: 12700 BISCAYNE BLVD. STE 401
City-St-Zip: NORTH MIAMI, FL 33181

Title: 1VC () Delete
Name: BURNS, KEVIN
Address: 2065 ALAMANDA DRIVE
City-St-Zip: NORTH MIAMI, FL 33181

Title: 2VC () Delete
Name: WRITT, GERALD
Address: 12850 BISCAYNE BLVD.
City-St-Zip: NORTH MIAMI, FL 33181

Title: T () Delete
Name: GALPERN, JOEL G
Address: 1035 NE 125 ST. STE 320
City-St-Zip: MIAMI, FL 33161

Title: S () Delete
Name: CLEMENTS, KATHY
Address: 12700 BISCAYNE BLVD
City-St-Zip: NORTH MIAMI, FL 33181

Title: IPC () Delete
Name: PIERRE, ANDRE
Address: 550 NE 124 STREET
City-St-Zip: NORTH MIAMI, FL 33161

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

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

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: JOEL G GALPERN

TR

01/05/2006

Electronic Signature of Signing Officer or Director

_____ Date