

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 22, 2008 8:00 am
Secretary of State

04-22-2008 90024 012 ****61.25

DOCUMENT # N04000006737

1. Entity Name
**BLACK CHAMBER OF COMMERCE OF PALM BEACH
COUNTY, INC.**



Principal Place of Business
P.O. BOX 223356
WEST PALM BEACH, FL 33422

Mailing Address
P.O. BOX 223356
WEST PALM BEACH, FL 33422

2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

04142008 Chg-NP CR2E037 (12/06)

4. FEI Number
57-1206942

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

**SOLOMON, LYNN
3511 VILLAGE BLVD, # 402
WEST PALM BEACH, FL 33409**

7. Name and Address of New Registered Agent

Name **A. Wayne Gill**
Street Address (P.O. Box Number is Not Acceptable)
200 Congress Park Drive, # 210
City **Delray Beach** **FL** Zip Code **33445**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE **A. Wayne Gill**

4/18/08

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

(NOTE: Registered Agent signature required when reinstating)

DATE

**Filing Fee is \$61.25
Due by May 1, 2008**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

**Make check payable to
Florida Department of State**

10. OFFICERS AND DIRECTORS

TITLE **D** ☒ Delete
NAME **ELLIOTT, JOHN**
STREET ADDRESS **13309-41 LANE NORTH**
CITY-ST-ZIP **ROYAL PALM BEACH, FL 33411**

TITLE **D** ☐ Delete
NAME **BAKER, VERDENIA**
STREET ADDRESS **301 N OLIVE AVE, # 1101**
CITY-ST-ZIP **WEST PALM BEACH, FL 33401**

TITLE **D** ☐ Delete
NAME **NUNNALLY, PAUL A**
STREET ADDRESS **P.O. BOX 220773**
CITY-ST-ZIP **WEST PALM BEACH, FL 33422**

TITLE **D** ☐ Delete
NAME **JENKINS, ANNETTE**
STREET ADDRESS **1655 PALM BEACH LAKE SBVLD STE 610**
CITY-ST-ZIP **WEST PALM BEACH, FL 33401**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE **Director** ☐ Change ☒ Addition
NAME **Lawrence Davenport**
STREET ADDRESS **7612 Eagle Point Drive**
CITY-ST-ZIP **Delray Beach, FL 33446**

TITLE **Director** ☐ Change ☒ Addition
NAME **Thais Sullivan**
STREET ADDRESS **971 Village Boulevard**
CITY-ST-ZIP **West Palm Beach, FL 33409**

TITLE **Director** ☐ Change ☒ Addition
NAME **A. Wayne Gill**
STREET ADDRESS **200 Congress Park Drive #210**
CITY-ST-ZIP **Delray Beach, FL 33445**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: **Paul A. Nunnally**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/15/08

Date

561-616-8001

Daytime Phone #