

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N15141

FILED
Jul 12, 2007
Secretary of State

Entity Name: THE NORTHERN PALM BEACHES CHAMBER OF COMMERCE, INC.

Current Principal Place of Business:

3970 RCA BOULEVARD
SUITE 7010
PALM BEACH GARDENS, FL 33410

New Principal Place of Business:

Current Mailing Address:

3970 RCA BOULEVARD
SUITE 7010
PALM BEACH GARDENS, FL 33410

New Mailing Address:

FEI Number: 59-2694906 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

STEINBACHER, CASEY MS.
3970 RCA BOULEVARD
SUITE 7010
PALM BEACH GARDENS, FL 33410 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:

Title: O () Delete
Name: REGAN, VIKI MS.
Address: 3970 RCA BOULEVARD, SUITE 7007
City-St-Zip: PALM BEACH GARDENS, FL 33410

Title: O () Delete
Name: RABENECKER, ROB MR.
Address: 4751 MAIN STREET
City-St-Zip: JUPITER, FL 33452

Title: O () Delete
Name: MURRAY, FRAN MR.
Address: 1 EAST 11TH STREET, SUITE 500
City-St-Zip: RIVIERA BEACH, FL 33404

Title: O () Delete
Name: HAMILTON, PATTI MS.
Address: 3720 NORTHLAKE BOULEVARD
City-St-Zip: LAKE PARK, FL 33403

Title: D () Delete
Name: COMPIANI, FRANK MR.
Address: 1555 PALM BEACH LAKES BLVD, STE 1400
City-St-Zip: WEST PALM BEACH, FL 33401

Title: D () Delete
Name: GAETA, NEIL MR.
Address: 5220 HOOD ROAD, SUITE 100
City-St-Zip: PALM BEACH GARDENS, FL 33418

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: O (X) Change () Addition
Name: SABIN, EDWARD MR.
Address: 4555 RIVERSIDE DRIVE
City-St-Zip: PALM BEACH GARDENS, FL 33410

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 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: CASEY STEINBACHER

MS.

07/12/2007

Electronic Signature of Signing Officer or Director

Date