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May 09 1997 8:00am
Secretary of State

NONPROFIT
CORPORATION
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # N18412 (9)

1. Corporation Name

MELBOURNE-PALM BAY AREA CHAMBER OF COMMERCE, INC



Principal Place of Business

Mailing Address

1005 EAST STRAWBRIDGE AVENUE
MELBOURNE FL 32901-4782

1005 EAST STRAWBRIDGE AVENUE
MELBOURNE FL 32901-4740

2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

3. Date Incorporated or Qualified

12/23/1986

3a. Date of Last Report

04/25/1996

4. FEI Number

59-1166430

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing

Trust Fund Contribution

☐

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☐ Yes ☐ No

10. Name and Address of New Registered Agent

BOHLMAN, LWW
1005 EAST STRAWBRIDGE AVENUE
MELBOURNE FL 32901-4782

81 Name

Bohlmann, Lee

82

Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE P ☐ DELETE

NAME BOHLMAN, LEE
STREET ADDRESS 1005 E STRAWBRIDGE AVE
CITY-ST-ZIP MELBOURNE FL

TITLE ☐ DELETE

NAME NOHRR, DONALD
STREET ADDRESS 1800 W HIBISCUS BLVD
CITY-ST-ZIP MELBOURNE FL

TITLE ☐ DELETE

NAME BRANDON, HARRY
STREET ADDRESS 1900 STRAWBRIDGE AVE.
CITY-ST-ZIP MELBOURNE FL

TITLE ☒ DELETE

NAME INGRAM, RODGER
STREET ADDRESS 430 BROWARD AVE.
CITY-ST-ZIP COCOA FL

TITLE ☐ DELETE

NAME LIGHTLE, BRIAN
STREET ADDRESS 65 E. NASA BLVD., SUITE 202
CITY-ST-ZIP MELBOURNE FL

TITLE ☐ DELETE

NAME FITGERALD, PAM
STREET ADDRESS 15 W HIBISCUS BLVD
CITY-ST-ZIP MELBOURNE FL

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE ☒ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☒ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE ☒ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

CR2E037 (9/96)