2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N21076

FILED Apr 20, 2011 Secretary of State

Entity Name: ENGLEWOOD-CAPE HAZE AREA CHAMBER OF COMMERCE, INC.

Current Principal Place of Business: New Principal Place of Business:

1160 SOUTH MCCALL ROAD, SUITE 1B 601 S INDIANA AVENUE

ENGLEWOOD, FL 34223 ÚS ENGLEWOOD, FL 342233788 US

Current Mailing Address: New Mailing Address:

1160 SOUTH MCCALL ROAD, SUITE 1B ENGLEWOOD, FL 34223 US

FEI Number: 59-0876627 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

BEDNERIK, JON C EX DIR 1160 SOUTH MCCALL ROAD, SUITE 1B ENGLEWOOD, FL 34223 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: VP/D

Name: DEPALMA, MATT
Address: 1450 PLACIDA ROAD
City-St-Zip: ENGLEWOOD, FL 34223

Title: D

 Name:
 MILLER, KAREN C

 Address:
 13455 MC CALL ROAD

 City-St-Zip:
 PORT CHARLOTTE, FL 33981

Title: PE/D

 Name:
 CONROY, MARY ANN

 Address:
 700 MEDICAL BOULEVARD

 City-St-Zip:
 ENGLEWOOD, FL 34223

Title: P/D

Name: STEELE, TED

Address: 533 PAUL MORRIS DRIVE City-St-Zip: ENGLEWOODQ, FL 34223

Title: T/D

Name: BURKE, PAUL

Address: 7233 SUMMER STREET City-St-Zip: ENGLEWOOD, FL 34224

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: JON BEDNERIK CEO 04/20/2011