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Jun 11 1998 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1998



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

DOCUMENT # N31863 (6)
1. Corporation Name
PALM BAY AREA CHAMBER OF COMMERCE, INC.



Principal Place of Business Mailing Address
1153 MALABAR RD NE STE 18 INTERCHANGE SQUARE PALM BAY FL 32907

3. Date Incorporated or Qualified 04/20/1989
4. FEI Number 59-2991587 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
7. Is this nonprofit corporation a homeowners association? Yes No
8. This corporation owes or has paid the current year intangible Personal Property Tax due June 30. Yes No

2. Principal Place of Business 2a. Mailing Address
21 Suite, Apt. #, etc. 26 Suite, Apt. #, etc.
22 City & State 27 City & State
23 Zip Country 28 Zip Country
24 25 29 30

9. Name and Address of Current Registered Agent
SIMON, HANK
481 TOPEKA RD SW
~~SUITE 18~~
PALM BAY FL 32908

10. Name and Address of New Registered Agent
81 Name
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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PD MOALLEM, M DAVID <input checked="" type="checkbox"/> DELETE	1.1 TITLE	Chairman <input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	MOALLEM, M DAVID	1.2 NAME	Carlson, Gil
STREET ADDRESS	981 MANDARIN DR NE	1.3 STREET ADDRESS	2412 Malabar Lakes Dr., NE
CITY-ST-ZIP	PALM BAY FL	1.4 CITY-ST-ZIP	Palm Bay FL 32907
TITLE	STD <input checked="" type="checkbox"/> DELETE	2.1 TITLE	Secretary <input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	CAMPFIELD, NANCY	2.2 NAME	Domonousky, Nancy
STREET ADDRESS	490 BUFFUM AVENUE, NE	2.3 STREET ADDRESS	765 SE Seven Gables Cir.
CITY-ST-ZIP	PALM BAY FL 32907	2.4 CITY-ST-ZIP	Palm Bay FL 32909
TITLE	VPD <input checked="" type="checkbox"/> DELETE	3.1 TITLE	Vice Chairman <input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	CARLSON, GIL	3.2 NAME	Wilson, Bill
STREET ADDRESS	2412 MALABAR LAKES DR NE	3.3 STREET ADDRESS	741 Montclair Rd., NE
CITY-ST-ZIP	PALM BAY FL	3.4 CITY-ST-ZIP	Palm Bay FL 32905
TITLE	<input type="checkbox"/> DELETE	4.1 TITLE	Chairman-Elect <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME		4.2 NAME	Nungesser, Gary T.
STREET ADDRESS		4.3 STREET ADDRESS	1036 Sandy Lane NE
CITY-ST-ZIP		4.4 CITY-ST-ZIP	Palm Bay FL 32905
TITLE	<input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

14. I 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.

SIGNATURE: _____

CR2E037 (10/97)