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Apr 23, 1999 8:00 am
Secretary of State

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NONPROFIT CORPORATION ANNUAL REPORT 1999		FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # N31863

1. Corporation Name

PALM BAY AREA CHAMBER OF COMMERCE, INC.Principal Place of Business
1153 MALABAR RD NE STE 18
INTERCHANGE SQUARE
PALM BAY FL 32907Mailing Address
1153 MALABAR RD NE STE 18
INTERCHANGE SQUARE
PALM BAY FL 32907

2. Principal Place of Business	2a. Mailing Address	3. Date Incorporated or Qualified
21 Suite, Apt. #, etc.	26 Suite, Apt. #, etc.	04/20/1989
22 City & State	27 City & State	4. FEI Number
23 Zip	28 Zip	59-2991587
24 Country	29 Country	5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required
	30 Country	6. Election Campaign Financing <input type="checkbox"/> \$5.00 May Be Added to Fees

9. Name and Address of Current Registered Agent	10. Name and Address of New Registered Agent
SIMON, HANK 481 TOPEKA RD SW SUITE 18 PALM BAY FL 32908	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 Hank Simon DATE 4/17/99
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	CD <input checked="" type="checkbox"/> DELETE	1.1 TITLE	Secretary - D <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	CARLSON, GIL	1.2 NAME	Smith, Cheryl
STREET ADDRESS	2412 MALABAR LAKES DR, NE	1.3 STREET ADDRESS	1766 Canova SE
CITY-ST-ZIP	PALM BAY FL 32907	1.4 CITY-ST-ZIP	Palm Bay, FL 32909
TITLE	SD <input type="checkbox"/> DELETE	2.1 TITLE	Vice Chairman - D <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	DOMONOUSKY, NANCY	2.2 NAME	Domonousky, Nancy
STREET ADDRESS	785 SE SEVEN GABLES CIR	2.3 STREET ADDRESS	
CITY-ST-ZIP	PALM BAY FL 32909	2.4 CITY-ST-ZIP	
TITLE	VCD <input type="checkbox"/> DELETE	3.1 TITLE	Chairman Elect - D <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	WILSON, BILL	3.2 NAME	Wilson, Bill
STREET ADDRESS	741 MONTCLAIR RD, NE	3.3 STREET ADDRESS	
CITY-ST-ZIP	PALM BAY FL 32905	3.4 CITY-ST-ZIP	
TITLE	CED <input type="checkbox"/> DELETE	4.1 TITLE	Chairman - D <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	NUNGESSER, GARY T	4.2 NAME	Nungesser, Gary T.
STREET ADDRESS	1036 SANDY LANE NE	4.3 STREET ADDRESS	
CITY-ST-ZIP	PALM BAY FL 32905	4.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	5.1 TITLE	Treasurer - D <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME		5.2 NAME	Bedwell, Anita
STREET ADDRESS		5.3 STREET ADDRESS	578 Balcom Terrace SE
CITY-ST-ZIP		5.4 CITY-ST-ZIP	Palm Bay, FL 32909
TITLE	<input type="checkbox"/> DELETE	6.1 TITLE	
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, with all other like empowered.

SIGNATURE Hank Simon SIGNATURE HANK SIMON DATE April 19, 1999 DAYTIME PHONE # 407/951-9998
Signature and typed or printed name of signing officer or director

CR2E037 (1/98)