

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N31863

1. Entity Name

PALM BAY AREA CHAMBER OF COMMERCE, INC.

FILED
Apr 25, 2000 8:00 am
Secretary of State

04-25-2000 90048 041 ****61.25

Principal Place of Business

Mailing Address

1153 MALABAR RD NE STE 18
INTERCHANGE SQUARE
PALM BAY FL 32907

1153 MALABAR RD NE STE 18
INTERCHANGE SQUARE
PALM BAY FL 32907-3264

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

59-2991587

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

SIMON, HANK
481 TOPEKA RD SW
SUITE 18
PALM BAY FL 32908

Name

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

City

FL

Zip Code

8. 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

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

(NOTE: Registered Agent signature required when reinstating)

4/12/00
DATE

FILE NOW:
FEE IS \$61.25

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make Check Payable to
Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE SD ☐ Delete
NAME SMITH, CHERYL
STREET ADDRESS 1766 CANOVA ST SE
CITY-ST-ZIP PALM BAY FL 32909

TITLE ☒ Change ☐ Addition
NAME VCD
STREET ADDRESS Smith, Cheryl
CITY-ST-ZIP 1766 Canova St. SE
Palm Bay, FL 32909

TITLE VCD ☐ Delete
NAME DOMONOUSKY, NANCY
STREET ADDRESS 765 SE SEVEN GABLES CIR
CITY-ST-ZIP PALM BAY FL 32909

TITLE ☒ Change ☐ Addition
NAME CED
STREET ADDRESS Domonousky, Nancy
CITY-ST-ZIP 765 SE Seven Gables Cir
Palm Bay, FL 32909

TITLE CED ☐ Delete
NAME WILSON, BILL
STREET ADDRESS 741 MONTCLAIR RD, NE
CITY-ST-ZIP PALM BAY FL 32905

TITLE ☒ Change ☐ Addition
NAME CD
STREET ADDRESS Wilson, Bill
CITY-ST-ZIP 741 Montclair Rd. NE
Palm Bay, FL 32905

TITLE CD ☒ Delete
NAME NUNGESSER, GARY T
STREET ADDRESS 1036 SANDY LANE NE
CITY-ST-ZIP PALM BAY FL 32905

TITLE ☐ Change ☒ Addition
NAME SD
STREET ADDRESS Joseph Reilly
CITY-ST-ZIP 1900 Palm Bay Rd. NE, #10
Palm Bay, FL 32905

TITLE TD ☐ Delete
NAME BEDWELL, ANITA
STREET ADDRESS 578 BALCOM TERR ST
CITY-ST-ZIP PALM BAY FL 32909

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (9/99)