2019 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 720610

Entity Name: LAKE WALES AREA CHAMBER OF COMMERCE, INC

FILED Feb 12, 2019 Secretary of State 8899259040CC

Current Principal Place of Business:

340 WEST CENTRAL AVE. LAKE WALES. FL 33853

Current Mailing Address:

340 WEST CENTRAL AVE. P. O. BOX 191 LAKE WALES. FL 33859 US

FEI Number: 59-0324245 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

KIEFT, KEVIN 340 WEST CENTRAL AVE. LAKE WALES, FL 33859 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: KEVIN KIEFT 02/12/2019

Electronic Signature of Registered Agent Date

Officer/Director Detail:

TitleDIRECTORTitleTREASURERNameMARBUTT, BRIANNameJACOBS, BILLAddress222 STATE ROAD 60 EAddress230 TILLMAN AVE

City-State-Zip: LAKE WALES FL 33853 City-State-Zip: LAKE WALES FL 33853

Title PRESIDENT, CEO Title DIRECTOR

Name KIEFT, KEVIN Name CLARKE, GERARD

Address 340 W CENTRAL AVENUE Address 340 WEST CENTRAL AVE.

City-State-Zip: LAKE WALES FL 33853

City-State-Zip: LAKE WALES FL 33853

Title DIRECTOR Title CHAIRMAN

NameFAZZINI, GIOVANNINameBACHELDER, MARYEMMAAddress340 WEST CENTRAL AVE.Address340 WEST CENTRAL AVE.City-State-Zip:LAKE WALES FL 33853City-State-Zip:LAKE WALES FL 33853

Title DIRECTOR Title DIRECTOR

Name WEATHERSBY WAYNE Name HUNT, ELLIS

Name WEATHERSBY, WAYNE Name HUNT, ELLIS

Address 340 WEST CENTRAL AVE Address 340 WEST CENTRAL AVE.

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City-State-Zip: LAKE WALES FL 33853

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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: KEVIN J KIEFT PRESIDENT/CEO 02/12/2019

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued:

Title DIRECTOR Title DIRECTOR

Name KRISTIE, REED Name ROBBIE, SHIELDS

Address 340 WEST CENTRAL AVE. Address 340 WEST CENTRAL AVE.

City-State-Zip: LAKE WALES FL 33853

City-State-Zip: LAKE WALES FL 33853

Title DIRECTOR Title DIRECTOR

Name BRUCE, FLOYD Name EPPS, LAWRENCE

Address 340 WEST CENTRAL AVE. Address 340 WEST CENTRAL AVE.

City-State-Zip: LAKE WALES FL 33853

City-State-Zip: LAKE WALES FL 33853

Title VC Title DIRECTOR

Name TATEM, ALLEN Name OGUNTOLA, ANDY

Address 340 WEST CENTRAL AVE. Address 340 WEST CENTRAL AVE.

City-State-Zip: LAKE WALES FL 33853

City-State-Zip: LAKE WALES FL 33853

Title DIRECTOR Title DIRECTOR

Name ANDREA, THIES Name KLEPACKI, REBECCA

Address 340 WEST CENTRAL AVE. Address 340 WEST CENTRAL AVE.

City-State-Zip: LAKE WALES FL 33853

Title DIRECTOR Title DIRECTOR

Name MILLER, GERALD Name POTTER, DARRIN

Address 340 WEST CENTRAL AVE. Address 340 WEST CENTRAL AVE.

City-State-Zip: LAKE WALES FL 33853

Title DIRECTOR Title DIRECTOR

Name PETERSEN, SAM Name BUSKIRK, RYAN

Address 340 WEST CENTRAL AVE.

City-State-Zip: LAKE WALES FL 33853

Address 340 WEST CENTRAL AVE.

City-State-Zip: LAKE WALES FL 33853