2019 FLORIDA NOT FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# 721601

Entity Name: GREATER DELRAY BEACH CHAMBER OF COMMERCE, INC.

FILED Oct 31, 2019 Secretary of State 5646030949CC

Current Principal Place of Business:

140 NE 1ST STREET DELRAY BEACH, FL 33444

Current Mailing Address:

140 NE 1ST STREET

DELRAY BEACH, FL 33444 US

FEI Number: 59-0581716 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

PLAKSTIS, LORRAINE 140 NE 1ST STREET DELRAY BEACH, FL 33444 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: LORRAINE PLAKSTIS 10/31/2019

> Date Electronic Signature of Registered Agent

Officer/Director Detail:

Title CHAIRMAN OF THE BOARD Title VICE CHAIR, PROGRAMMING

Name BRANNING, WILLIAM Name PAYNE, NOREEN Address 9 NE 2ND ST Address 222 KINGS LANE

City-State-Zip: DELRAY BEACH FL 33444 City-State-Zip: DELRAY BEACH FL 33444

Title IMMEDIATE PAST CHAIRMAN OF THE Title VICE CHAIR, MARKETING &

BOARD COMMUNICATIONS

POSILLICO, ROBERT BALESTRIERE, CATHY Name Name

3100 S FEDERAL HIGHWAY **82 GLEASON STREET** Address Address

SUITE G DELRAY BEACH FL 33483

City-State-Zip: City-State-Zip: DELRAY BEACH FL 33483

Title VICE CHAIR, FINANCE Title VICE CHAIR, ECONOMIC HICKOK, ROBERT **DEVELOPMENT** Name

Name CHARD, JAMES

Address 55 SE 2ND AVE

SUITE 202-203 Address 401 SE 4TH AVENUE

City-State-Zip: DELRAY BEACH FL 33444 City-State-Zip: DELRAY BEACH FL 33483

Title VICE CHAIR, GOVT Title PRESIDENT & CEO AFFAIRS/ADVOCACY

Name IMMELMAN, STEPHANIE Name KANIUK, RONALD

Address 140 NE 1ST STREET 950 PENINSULA CORPORATE CIRCLE Address

SUITE 3001 City-State-Zip: DELRAY BEACH FL 33444

BOCA RATON FL 33487 City-State-Zip:

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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.

10/31/2019 SIGNATURE: LORRAINE PLAKSTIS FINANCE DIRECTOR

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued:

Title FINANCE MANAGER
Name PLAKSTIS, LORRAINE
Address 140 NE 1ST STREET

City-State-Zip: DELRAY BEACH FL 33444