

2018 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 736425

Entity Name: GREATER FORT MYERS BEACH AREA CHAMBER OF COMMERCE, INC.**Current Principal Place of Business:**1054 5TH STREET
FORT MYERS BEACH, FL 33931**Current Mailing Address:**1054 5TH STREET
FORT MYERS BEACH, FL 33931 US**FEI Number: 59-0868976****Certificate of Status Desired: No****Name and Address of Current Registered Agent:**LISZAK, JACQUELYN
1054 5TH STREET
FORT MYERS BEACH, FL 33931 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: JACQUELYN LISZAK****03/28/2018**

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title PRESIDENT
Name LISZAK, JACQUELYN
Address 1054 5TH STREET
City-State-Zip: FORT MYERS BEACH FL 33931

Title VICE CHAIR, OPERATIONS
Name BRENNER, CURT
Address 1054 5TH STREET
City-State-Zip: FORT MYERS BEACH FL 33931

Title CHAIRMAN
Name GAVIN, JOHN
Address 1054 5TH STREET
City-State-Zip: FORT MYERS BEACH FL 33931

Title VICE CHAIR, MARKETING &
BUSINESS DEVELOPMENT
Name PODRAZA, FRAN
Address 1054 5TH STREET
City-State-Zip: FORT MYERS BEACH FL 33931

Title VICE CHAIR, MEMBERSHIP
RECRUITMENT & DEVELOPMENT
Name LEPLEY, SANDRA
Address 1054 5TH STREET
City-State-Zip: FORT MYERS BEACH FL 33931

Title TREASURER
Name FARRELL, BARBARA
Address 1054 5TH STREET
City-State-Zip: FORT MYERS BEACH FL 33931

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: JACQUELYN LISZAK**PRESIDENT****03/28/2018**

Electronic Signature of Signing Officer/Director Detail

Date