

NAIOP CENTRAL FL DEVELOPERS SHOWCASE

OCTOBER 11TH, 2018

4:00 PM - 6:00 PM

CHURCH STREET STATION BALLROOM
225 S GARLAND AVE. ORLANDO, FL 32801

The Developers Showcase provides a trade show like platform for Central FL developers to share new, planned & existing projects with NAIOP's network of brokers, developers, owners, investors and associated professionals. If you are a developer or owner of a commercial project in the Central FL market, this is a do not miss opportunity.

Booths:

Booth space is available to developers and owners with commercial real estate projects in the Central Florida market. Categories include office, industrial, retail, multi-family, and mixed-use/other. Exhibitor booths include your logo on all marketing materials and our website, signage at the event, and 2 tickets.

Premium Booth (10x10)

1 Available | \$700 Members | \$900 Non-Members

Standard Booth (6x6)

3 Available | \$350 Members | \$550 Non-Members

Associate Industry Booth (6x6)

3 Available | \$500 Members | \$700 Non-Members

Event Sponsor



Food & Beverage Sponsor

\$1000 Members | \$1250 Non-Members

Champagne Sponsor



Austin Commercial
An Austin Industries Company

Thank you to our event

booth sponsors:



Attendee Registration

(Includes open bar & food)

Members \$40 | Non-Members \$80 |

Developing Leaders \$35 | Students \$10

FOR MORE INFO, PLEASE CONTACT
LINDSAY WINTER
lindsay@naiopcfl.org / (407).443.0568



NAIOP CENTRAL FL DEVELOPERS SHOWCASE

Yes, I want to participate in the Developers Showcase!

Premium Booth: Members \$700 | Non-Members \$900

Standard Booth: Members \$350 | Non-Members \$550

Associate Industry Booth: Members \$500 | Non-Members \$700

Food & Beverage Sponsor: Members \$1000 | Non-Members \$1250

Event Sponsor: Members \$1250 | Non-Members \$1500

Champagne Sponsor: Members \$500 | Non-Members \$750

Attendee Registration

Members \$40 ____ | Non-Members \$80 ____ | Developing Leaders \$35 ____ | Students \$10 ____

GUEST NAME: _____

PAY BY CC BELOW ____ MAILING CHECK ____

COMPANY: _____

BILLING ADDRESS: _____

PLEASE CHARGE \$ ____ TO MY VISA ____ MC ____ AMEX ____

CARD # & EXPIRATION DATE: _____

EMAIL: _____

SIGNATURE: _____

FOR MORE INFO, PLEASE CONTACT
LINDSAY WINTER
lindsay@naiopcfl.org / (407).443.0568

