

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Feb 08, 2005 8:00 am
Secretary of State

02-08-2005 90016 041 ****61.25

DOCUMENT # 730757					
1. Entity Name MARTIN-ST. LUCIE CHAPTER OF S.P.E.B.S.Q.S.A., INC.					
Principal Place of Business RIO CIVIC CENTER 1225 NE DIXIE HWY (707) RIO FL 34957 US			Mailing Address 1701 SE BALMORAL CT. PORT SAINT LUCIE FL 34952 US		
2. Principal Place of Business			3. Mailing Address		
Suite, Apt. #, etc.			Suite, Apt. #, etc.		
City & State			City & State		
Zip	Country	Zip	Country	4. FEI Number 65-0437461	
				Applied For Not Applicable	
				5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent VAN ALLEN, STEPHEN E. 1701 SE BALMORAL CT PORT SAINT LUCIE FL 34952-4136				7. Name and Address of New Registered Agent 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. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE <u>Stephen E. Van Allen</u>		(NOTE: Registered Agent signature required when reinstating)		DATE <u>02/01/05</u>	
FILE NOW: FEE IS \$61.25 Due By May 1, 2005		9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees		Make Check Payable to Florida Department of State	
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P CHAMPA, ANTHONY 12175 SE BANNER LAKE CIRCLE HOBE SOUND FL 33455 ☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	P RICHARD KOUNS 400 NORTH A1A, JUPITER RIVER PK. LOT 97 JUPITER, FL 33477 ☒ Change ☐ Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S HOFFMAN, CHARLES 553 LOCKERBY PLACE HOBE-SOUND FL 33455 ☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	S EDWARD CASEY 348 EUROPEAN LANE FORT PIERCE, FLA 34982-3929 ☒ Change ☐ Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP FELIMAN, ARNOLD 400 NORTH A1A, #20 JUPITER FL 33477 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD VAN ALLEN, STEPHEN 1701 SE BALMORAL CT. PORT SAINT LUCIE FL 34952 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	BM VALENTI, FRANCIS 1474 NW COCONUT POINT LANE STUART FL 34994 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	BM KRAMER, CLEMONS 2702 ATLANTIC AVE. FORT PIERCE FL 34947 ☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	BM F. RICHARD ELLEN BERGER 19670 BEACH RD. PHC-2 JUPITER, FL 33469 ☒ Change ☐ Addition		
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: <u>Stephen E. Van Allen</u> - STEPHEN E. VAN ALLEN <u>02/01/05</u> <u>772-335-7321</u>					
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #					

30012010



1st MOORE CR2E037 (10/04)