

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 748100

FILED
Feb 22, 2011
Secretary of State

Entity Name: THE ARC OF ST. LUCIE COUNTY, INC.

Current Principal Place of Business:

601 OHIO AVE
FT. PIERCE, FL 34950 US

New Principal Place of Business:

Current Mailing Address:

P. O. BOX 1016
FT. PIERCE, FL 34954 US

New Mailing Address:

FEI Number: 59-1100961

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

KING, CHERYL L EX DIR
9405 MEADOWOOD DRIVE
FT. PIERCE, FL 34951 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: DP
Name: KIRK, GREG
Address: 904 DIANE DRIVE
City-St-Zip: PORT ST LUCIE, FL 34952

Title: DVP
Name: YOUNG, KIRK
Address: 611 S INDIAN RIVER DR
City-St-Zip: FORT PIERCE, FL 34950

Title: DS
Name: MILLER-MOORE, BARNEY
Address: 1466 SW FLOUNDER LANE
City-St-Zip: PT. ST. LUCIE, FL 34988

Title: DT
Name: BOUTON, CHERYL
Address: 5208 NW DOWNEY COURT
City-St-Zip: PT. ST. LUCIE, FL 34983

Title: D
Name: MELVILLE, ERIK
Address: 600 N INDIAN RIVER DRIVE, SUITE 300
City-St-Zip: FORT PIERCE, FL 34950

Title: D
Name: COSTA, CATHI
Address: 1591 SE CROQUET ST.
City-St-Zip: PT. ST. LUCIE, FL 34983

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: CHERYL L KING

ED

02/22/2011

Electronic Signature of Signing Officer or Director

Date