

FILE NOW: FILING FEE IS \$61.25

FILED

May 20 1997 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1997				FLORIDA DEPARTMENT OF STATE Sandra B. McRham Secretary of State DIVISION OF CORPORATIONS	
DOCUMENT # 752196 (6) 1. Corporation Name THE MARTIN COUNTY COUNCIL FOR THE ARTS, INC.					
Principal Place of Business 80 E. OCEAN BLVD. STUART FL 34994			Mailing Address 80 E. OCEAN BLVD. STUART FL 34994-2234		
2. Principal Place of Business 21 Suite, Apt. #, etc. 22 City & State 23 Zip 24 Country		2a. Mailing Address 26 Suite, Apt. #, etc. 27 City & State 28 Zip 29 Country		3. Date Incorporated or Qualified 04/25/1980	
				3a. Date of Last Report 04/10/1996	
				4. FEI Number 59-2015691	
				5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required	
				6. Election Campaign Financing Trust Fund Contribution ☐ \$5.00 May Be Added to Fees	
				8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☐ No	
9. Name and Address of Current Registered Agent ROEGIERS, STEPHEN 701 COLORADO AVENUE PALM CITY, FL 34990			10. Name and Address of New Registered Agent 81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 83 84 City FL 85 Zip Code		
11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.					
SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____					
12. OFFICERS AND DIRECTORS					
TITLE	TD	☒ DELETE	TITLE	ED	☐ Change ☒ Addition
NAME	HAYMAKER, GIDEON		1.1 NAME	Mary B. Shaw	
STREET ADDRESS	PO BOX 8 N/A		1.2 STREET ADDRESS	80 E. Ocean Blvd.	
CITY-ST-ZIP	FT PIERCE FL		1.4 CITY-ST-ZIP	Stuart, Florida 34994	
TITLE	CD	☒ DELETE	2.1 TITLE	CD	☐ Change ☒ Addition
NAME	O'CONNOR, MAUREEN		2.2 NAME	Samia Ferrao	
STREET ADDRESS	508 COLORADO AVE.		2.3 STREET ADDRESS	40 SE Atlantic Blvd.	
CITY-ST-ZIP	STUART FL		2.4 CITY-ST-ZIP	Stuart, FL 34996	
TITLE	VD	☒ DELETE	3.1 TITLE	VD	☐ Change ☐ Addition
NAME	ROEGIERS, STEPHEN		3.2 NAME	Carl Schenk	
STREET ADDRESS	701 COLORADO AVENUE		3.3 STREET ADDRESS	3300 PGA Blvd. Suite 900 Palm Beach	
CITY-ST-ZIP	STUART FL		3.4 CITY-ST-ZIP		
TITLE	VD	☒ DELETE	4.1 TITLE	SD	☐ Change ☐ Addition
NAME	FOX M. LANNING		4.2 NAME	Jane Dickerson	
STREET ADDRESS	1100 SE FEDERAL HWY.		4.3 STREET ADDRESS	5453 SE Miles Grant, #C202	
CITY-ST-ZIP	STUART FL		4.4 CITY-ST-ZIP	Stuart, FL 34997	
TITLE	VD	☒ DELETE	5.1 TITLE	TD	☐ Change ☐ Addition
NAME	GUY, SHERRY W		5.2 NAME	Michael Hermesmeier	
STREET ADDRESS	55 E OCEAN BLVD		5.3 STREET ADDRESS	2400 Monterey Road #300	
CITY-ST-ZIP	STUART FL		5.4 CITY-ST-ZIP	Stuart, FL 34994	
TITLE	SD	☒ DELETE	6.1 TITLE		☐ Change ☐ Addition
NAME	MCGUFFEY, MARION		6.2 NAME		
STREET ADDRESS	6750 SW GAINES AVENUE		6.3 STREET ADDRESS		
CITY-ST-ZIP	STUART FL		6.4 CITY-ST-ZIP		



CR2E037 (9/96)

SIGNATURE:

[Signature]
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/11/97 561-283-0508