

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 752196

1. Entity Name

THE MARTIN COUNTY COUNCIL FOR THE ARTS, INC.

FILED
May 09, 2000 8:00 am
Secretary of State

05-09-2000 90059 049 ****61.25

Principal Place of Business

Mailing Address

80 E. OCEAN BLVD.
STUART FL 34994

80 E. OCEAN BLVD.
STUART FL 34994-2234

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

59-2015691

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

~~RODGERS, STEPHEN~~
~~701 COLORADO AVENUE~~
~~PALM CITY, FL 34990X~~

Name

Deborah Ross

Street Address (P.O. Box Number is Not Acceptable)

401 E. Osceola St.

Stuart, FL 34994

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.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW:
FEE IS \$61.25

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make Check Payable to
Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE ED ☒ Delete
NAME SHAW, MARY B
STREET ADDRESS 80 E OCEAN BLVD
CITY-ST-ZIP STUART FL

TITLE ED ☒ Change ☐ Addition
NAME Nancy K. Turrell
STREET ADDRESS 80 E. Ocean Blvd.
CITY-ST-ZIP Stuart, FL 34994

TITLE CD ☒ Delete
NAME FERRAO, SAMIA
STREET ADDRESS 40 SE ST LUCIE BLVD
CITY-ST-ZIP STUART FL

TITLE CD ☒ Change ☐ Addition
NAME Sue Hershey
STREET ADDRESS 352 Ridge Lane
CITY-ST-ZIP Stuart, FL 34994

TITLE VD ☒ Delete
NAME SCHENK, CARL
STREET ADDRESS 3300 PGA BLVD, SUITE 900
CITY-ST-ZIP PALM BEACH FL

TITLE VD ☒ Change ☐ Addition
NAME Rosalen Cline
STREET ADDRESS 2818 SE Dune Drive
CITY-ST-ZIP Stuart, FL 34996

TITLE SD ☒ Delete
NAME DICKERSON, JANE
STREET ADDRESS 5453 SE MILES GRANT, #C202
CITY-ST-ZIP STUART FL

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE TD ☒ Delete
NAME HERMESMEYER, MICHAEL
STREET ADDRESS 2400 MONTEREY RD #300
CITY-ST-ZIP STUART FL

TITLE ☒ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE TD ☐ Change ☒ Addition
NAME Scott Beckett
STREET ADDRESS 238 Fairway West
CITY-ST-ZIP Tequesta, FL 33477

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

SIGNATURE OF NANCY K. TURRELL

4/24/2000

561-287-6676

CR2E037 (9/99)