

2005 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

**FILED
Oct 14, 2005
Secretary of State**

DOCUMENT# N04000008150

Entity Name: MARTIN COUNTY YOUTH WORKERS ASSOCIATION, INC.

Current Principal Place of Business:

1400 JENSEN BEACH BOULEVARD
JENSEN BEACH, FL 34957

New Principal Place of Business:

Current Mailing Address:

1400 JENSEN BEACH BOULEVARD
JENSEN BEACH, FL 34957

New Mailing Address:

FEI Number: FEI Number Applied For () FEI Number Not Applicable (X) Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

CARSWELL, BRANDON S
1400 JENSEN BEACH BOULEVARD
JENSEN BEACH, FL 34957 US

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: BRANDON S CARSWELL

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D () Delete
Name: DALY, FRANK
Address: POST OFFICE BOX 539
City-St-Zip: STUART, FL 34995

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: D () Delete
Name: BARNES, DONNA
Address: POST OFFICE BOX 265
City-St-Zip: HOBE SOUND, FL 33475

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: D () Delete
Name: TURNER, JARM
Address: 1550 SE SALERNO ROAD
City-St-Zip: STUART, FL 34997

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: D (X) Delete
Name: VARELLA, DOUGLAS
Address: 3998 SW LEIGHTON FARM ROAD
City-St-Zip: PALM CITY, FL 34990

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: D () Delete
Name: B. STEVE CARSWELL,
Address: 1400 JENSEN BEACH BOULEVARD
City-St-Zip: JENSEN BEACH, FL 34957

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 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 an address, with all other like empowered.

SIGNATURE: B. STEVE CARSWELL

D

10/14/2005

Electronic Signature of Signing Officer or Director

Date