2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N11283

FILED Mar 12, 2009 Secretary of State

Entity Name: CONSERVATION ALLIANCE OF ST. LUCIE COUNTY, INC.

Current Principal Place of Business: New Principal Place of Business: P O BOX 12515 5372 NW COMMODORE TERR FORT PIERCE, FL 34979 PORT ST LUCIE, FL 34983 LIS **Current Mailing Address: New Mailing Address:** P O BOX 12515 FORT PIERCE, FL 34979 US FEI Number: 59-2461819 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: ROGERS, ENOSH W ROGERS, ENOCH W 5372 NW COMMODORE TERR 5372 NW COMMODORE TERR PORT SAINT LUCIE, FL 34983 US PORT SAINT LUCIE, FL 34983 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: ENOCH W ROGERS 03/12/2009 Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Change () Addition () Delete ROGERS, ENOCH Name: Name: 5372 COMMODORE TERR Address: Address: City-St-Zip: PORT SAINT LUCIE, FL 34983 City-St-Zip: Title: Title: () Delete () Change () Addition BANGERT, ROBERT F Name: Name: Address: 5608 EAGLE DR Address: City-St-Zip: FORT PIERCE, FL 34951 City-St-Zip: Title: () Delete Title: (X) Change () Addition MILLARD, ELSA Name: MILLARD, ELSA Name: 4617 NW COVE CIR 2302 SUNRISE BLVD Address: Address: City-St-Zip: PORT SAINT LUCIE, FL 34983 City-St-Zip: FORT PIERCE, FL 34982 () Delete Title: Title: (X) Change () Addition STINNETTE, KENVIN Name: Name: STINNETTE, KEVIN Address: 10303 S. INDIAN RIVER DR. Address: 10303 S. INDIAN RIVER DR. City-St-Zip: FORT PIERCE, FL 34982 City-St-Zip: FORT PIERCE, FL 34982 Title: () Delete Title: (X) Change () Addition MITCHELL, JEFFERSON MITCHELL, JEFFERSON Name: Name: 775 ALEXANDRIA AVE. SW 775 ALEXANDRIA AVE. SW Address: Address: City-St-Zip: VERO BEACH, FL 32968 City-St-Zip: VERO BEACH, FL 32968 Title: () Delete Title: () Change () Addition HOLT, JOHN Name: Name: Address: 122 ORANGE AVE. Address: FORT PIERCE, FL 34945 City-St-Zip: City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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: ENOCH W ROGERS T 03/12/2009