

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N24558

FILED
Apr 25, 2011
Secretary of State

Entity Name: MARTIN COUNTY COMMUNITY FOUNDATION, INC.

Current Principal Place of Business:

C/O WILLIAM C. FOWLER, JR PROCTOR CROOK &
33 SW FLAGLER AVENUE
STUART, FL 34994 US

New Principal Place of Business:

C/O MIKE CROOK, PROCTOR CROOK & CROWDER
33 SW FLAGLER AVENUE
STUART, FL 349942140 US

Current Mailing Address:

C/O WILLIAM C. FOWLER, JR PROCTOR CROOK &
33 SW FLAGLER AVENUE
STUART, FL 34994 US

New Mailing Address:

C/O MIKE CROOK, PROCTOR CROOK & CROWDER
33 SW FLAGLER AVENUE
STUART, FL 349942140 US

FEI Number: 65-0024030

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FOWLER, WILLIAM C JR
33 SW FLAGLER AVENUE
STUART, FL 34994 US

Name and Address of New Registered Agent:

FOWLER, WILLIAM C JR
851 SE MONTEREY COMMONS BLVD
STUART, FL 349963337 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: WILLIAM C FOWLER JR

04/25/2011

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD
Name: FOWLER, WILLIAM C JR
Address: 851 SE MONTEREY COMMONS BLVD
City-St-Zip: STUART, FL 349963337 US

Title: VPT
Name: CROOK, THOMAS M
Address: 33 SW FLAGLER AVENUE
City-St-Zip: STUART, FL 349942140 US

Title: S
Name: WEBER, THOMAS E JR
Address: 33 SW FLAGLER AVENUE
City-St-Zip: STUART, FL 349942140 US

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: WILLIAM C FOWLER JR

PD

04/25/2011

Electronic Signature of Signing Officer or Director

Date