

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 05, 2007
Secretary of State

DOCUMENT# N42841

Entity Name: MARTIN COMMONS PHASE TWO PROPERTY OWNERS' ASSOCIATION, INC.

Current Principal Place of Business:

C/O ROSS EARLE BONAN PA
759 S FEDERAL HWY STE 212
STUART, FL 34994

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 2401
STUART, FL 34995

New Mailing Address:

FEI Number: 65-0336377 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ROSS, DEBORAH L ESQ
759 S FEDERAL HIGHWAY
STE 212
STUART, FL 34994 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

_____ Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: TUCKER, GEOFFREY
Address: 4150 SW SUN DOWN LANE
City-St-Zip: PALM CITY, FL 34990

Title: VPD () Delete
Name: RICARO, MARIA
Address: 5606 SW HONEY TER
City-St-Zip: PALM CITY, FL 34990

Title: SD () Delete
Name: BUSHMAN, CRAIG
Address: 5654 SW MARTIN COMMONS WAY
City-St-Zip: PALM CITY, FL 34990

Title: TD () Delete
Name: BERRIOS, EDWIN
Address: 5603 SW MARTIN COMMONS WAY
City-St-Zip: PALM CITY, FL 34990

Title: D () Delete
Name: GLASURE, RITA
Address: 4100 SW SUNDOWN LANE
City-St-Zip: PALM CITY, FL 34990

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: SCHNEIDER, HEATHER
Address: 5004 SW MARTIN COMMONS WAY
City-St-Zip: PALM CITY, FL 34990

Title: VPD (X) Change () Addition
Name: TYSINGER, CHARLES
Address: 5604 SW MARTIN COMMONS WAY
City-St-Zip: PALM CITY, FL 34990

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

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

Title: D (X) Change () Addition
Name: VANMETER, STEVEN
Address: 4993 SW MARTIN COMMONS WAY
City-St-Zip: PALM CITY, FL 34990

I hereby certify that the information supplied with this filing does not qualify for the 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: CRAIG BUSHMAN

SD

04/05/2007

Electronic Signature of Signing Officer or Director

_____ Date