SIGNATURE	: ROBERT MORRIS			01/22/2023	
	Electronic Signature of Registered Agent			Date	
Officer/Direc	ctor Detail :				
Title	DIRECTOR	Title	DIRECTOR		
Name	MORRIS, ROBERT	Name	GLASS, WILBUR		
Address	1782 SW EFFLAND AVE.	Address	1531 SE BERKSHIRE BLVD.		
City-State-Zip:	PORT ST. LUCIE FL 34953	City-State-Zip:	PORT ST LUCIE FL 34952		
Title	TREASURER	Title	VP		
Name	SOREL, JOHN D	Name	FISCHER, DAVID		
Address	1680 SE LAKE LEGACY WAY	Address	2073 SE WASHINGTON ST.		
City-State-Zip:	STUART FL 34997	City-State-Zip:	STUART FL 34997		
Title	DIRECTOR	Title	DIRECTOR		
Name	YELLAND, JAMES	Name	AGUILAR, DAN		
Address	4747 NW WINTER OAK COURT	Address	3680 SW RIVERS WAY		
City-State-Zip:	JENSEN BEACH FL 34957	City-State-Zip:	PALM CITY FL 34990		
Title	PRESIDENT	Title	DIRECTOR		
Name	CHIANESE, NEAL	Name	HANSON, CHASE		
Address	9639 LANDINGS DR	Address	1243 TANGELO AVE		
City-State-Zip:	PORT ST LUCIE FL 34986	City-State-Zip:	WEST PALM BEACH FL 3340	06	

2023 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 743767

Entity Name: MARTIN COUNTY SPORTSMEN'S ASSOCIATION, INC.

Current Principal Place of Business:

8415 SW BUSCH ST PALM CITY, FL 34990

Current Mailing Address:

P.O. BOX 1306 STUART, FL 34995-1306

FEI Number: 59-1896620

Name and Address of Current Registered Agent:

MORRIS, ROBERT 1782 SW EFFLAND AVE. PORT ST. LUCIE, FL 33953 US

Continues on page 2

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: JOHN D SOREL

TREASURER

01/22/2023

Electronic Signature of Signing Officer/Director Detail

Date

FILED Jan 22, 2023 Secretary of State 1285566087CC

Certificate of Status Desired: No

Officer/Director Detail Continued :

Title	SECRETARY		
Name	LAWSON, JAMES		
Address	2047 SW BAMBI TERRACE		
City-State-Zip:	STUART FL 34997		