Electronic Signature of Signing Officer/Director Detail	

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DOCUMENT# N42576

Entity Name: BOYS AND GIRLS CLUB OF MARTIN COUNTY, INC.

Current Principal Place of Business:

11500 SE LARES AVE HOBE SOUND, FL 33455

Current Mailing Address:

P.O. BOX 910 HOBE SOUND, FL 33475 US

FEI Number: 65-0253002

Name and Address of Current Registered Agent:

FLETCHER, KEITH 11954 SE DIXIE HIGHWAY HOBE SOUND, FL 33455 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	E KEITH FLETCHER			01/28/2021
	Electronic Signature of Registered Agent			Date
Officer/Dired	ctor Detail :			
Title	CEO	Title	PRESIDENT	
Name	FLETCHER, KEITH	Name	BROOKS, DIANA D.	
Address	P.O. BOX 910	Address	P.O. BOX 910	
City-State-Zip:	HOBE SOUND FL 33475	City-State-Zip:	HOBE SOUND FL 33475	
Title	SECRETARY	Title	EXECUTIVE COMMITTEE	
Name	PARSONS, KATHY	Name	REESE, JOHN	
Address	P.O. BOX 910	Address	P.O. BOX 910	
City-State-Zip:	HOBE SOUND FL 33475	City-State-Zip:	HOBE SOUND FL 33475	
Title	EXECUTIVE COMMITTEE	Title	VICE PRESIDENT OF FINANC	E
Name	WHITMAN, WILLIAM	Name	SOARES, HEIDI	
Address	P.O. BOX 910	Address	P.O. BOX 910	
City-State-Zip:	HOBE SOUND FL 33475	City-State-Zip:	HOBE SOUND FL 33475	
Title	EXECUTIVE COMMITTEE	Title	CHIEF OUTCOMES AND CLUE EXPERIENCE OFFICER	3
Name	GARRY, ROBERT	Name	TORRES, SARAH R.	
Address	P.O. BOX 910	Address	P.O. BOX 910	
City-State-Zip:	HOBE SOUND FL 33475	City-State-Zip:		

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: ERIC J. WATERS

CHIEF FINANCIAL & ADMINISTRATIVE OFFICER 01/28/2021

FILED Jan 28, 2021 Secretary of State 6601244927CC

Certificate of Status Desired: Yes

Date

Officer/Director Detail Continued :

Title TREASURER Name RIEPE, JAMES P.O. BOX 910 Address City-State-Zip: HOBE SOUND FL 33475 Title CHIEF CULTURE OFFICER Name YOIA, LINDSAY N Address P.O. BOX 910 City-State-Zip: HOBE SOUND FL 33475 EXECUTIVE COMMITTEE Title ROBITAILLE, MARK Name Address P.O. BOX 910 City-State-Zip: HOBE SOUND FL 33475 Title EXECUTIVE COMMITTEE Name NIELSEN, KATE Address P.O. BOX 910 City-State-Zip: HOBE SOUND FL 33475

Title	CHIEF FINANCIAL & ADMINISTRATIVE OFFICER
Name	WATERS, ERIC J.
Address	P.O. BOX 910
City-State-Zip:	HOBE SOUND FL 33475
Title	CHIEF ADVANCEMENT OFFICER
Name	HOFFMAN, ANGELA
Address	P.O. BOX 910
City-State-Zip:	HOBE SOUND FL 33475
Title	EXECUTIVE COMMITTEE
Name	WEBB, CAROL
Address	P.O. BOX 910
City-State-Zip:	HOBE SOUND FL 33475
Title	CHIEF PHILANTHROPY OFFICER
Name	JOHNSON, DEBORAH
Address	P.O. BOX 910
City-State-Zip:	