2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT#711385

FILED Mar 02, 2010 Secretary of State

Entity Name: INDIANTOWN WESTERN MARTIN COUNTY CHAMBER OF COMMERCE, INC.

Current Principal Place of Business: New Principal Place of Business:

15935 S.W. WARFIELD INDIANTOWN, FL 34956

Current Mailing Address: New Mailing Address:

US

P.O. BOX 602

INDIANTOWN, FL 34956 US

FEI Number: 59-2058229 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:

FISH, ALLON MR. 15935 SW. WARFIELD BLVD. INDIANTOWN, FL 34956 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:

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: D

Name: MATSON, ARTHUR MR
Address: 16142 SW FIVE WOOD WAY
City-St-Zip: INDIANTOWN, FL 34956

Title: VC

Name: POWERS, DAVID MR
Address: 15328 SW WARFIELD BLVD
City-St-Zip: INDIANTOWN, FL 34956

Title: SEC

Name: BEAUSOLEIL, ANDREA R MS. Address: 2601 S .W. HIGH MEADOW AVENUE

City-St-Zip: PALM CITY, FL 34990

Title: PC

 Name:
 WATSON, SCOTT MR.

 Address:
 P.O. BOX 176

 City-St-Zip:
 INDIANTOWN, FL 34956

Title: C

Name: CARMAN, DONNA MS Address: 15518 SW OSCEOLA ST City-St-Zip: INDIANTOWN, FL 34956

Title: F

Name: FISH, ALLON R MR.

Address: 15935 S.W. WARFIELD BLVD. City-St-Zip: INDIANTOWN, FL 34956

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: ALLON R. FISH PRES 03/02/2010