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NONPROFIT CORPORATION ANNUAL REPORT 1999				FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS	
DOCUMENT # 727783					
1. Corporation Name MARTIN COUNTY LIBRARY ASSOCIATION, INC.					
Principal Place of Business 701 EAST OCEAN BOULEVARD STUART FL 34994			Mailing Address 701 EAST OCEAN BOULEVARD STUART FL 34994		



2. Principal Place of Business 21 2351 S.E. Monterey Rd Suite, Apt. #, etc. NA.		2a. Mailing Address 26 2351 S.E. Monterey Rd Suite, Apt. #, etc. NA.		3. Date Incorporated or Qualified 10/17/1973	
22 STUART, FL		27 STUART, FL.		4. FEI Number 59-6155142	
23 STUART, FL		28 STUART, FL.		5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required	
24 34996		29 34996		6. Election Campaign Financing Trust Fund Contribution ☐ \$5.00 May Be Added to Fees	

9. Name and Address of Current Registered Agent MAC CURRY, ROBERT 1444 S.E. ST. LUCIE BLVD STUART, FL. 34996				10. Name and Address of New Registered Agent 81 Name MACCURRY, ROBERT WOOD 82 Street Address (P.O. Box Number is Not Acceptable) 1444 S.E. ST. LUCIE BLVD 83 84 City STUART FL 85 Zip Code 34996			
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11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE Robert Wood MacCurry, Treasurer DATE 2 Feb. 1999

Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS				13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12			
TITLE	PD	☒ DELETE		1.1 TITLE	TD - TREASURER	☐ Change	☒ Addition
NAME	HAMILTON, WILLIAM H.			1.2 NAME	MACCURRY, ROBERT WOOD		
STREET ADDRESS	1724 SW WATERFALL BLVD			1.3 STREET ADDRESS	1444 S.E. ST LUCIE BLVD		
CITY-ST-ZIP	PALM CITY FL 34990			1.4 CITY-ST-ZIP	STUART, FL. 34996		
TITLE	VD	☒ DELETE		2.1 TITLE	PD - PRESIDENT	☒ Change	☐ Addition
NAME	CHRISTIE, MILTON			2.2 NAME	CHRISTIE, MILTON		
STREET ADDRESS	103 S. SEWALL'S PT. RD.			2.3 STREET ADDRESS	103 S. SEWALL'S PT. RD.		
CITY-ST-ZIP	STUART FL			2.4 CITY-ST-ZIP	STUART, FL		
TITLE	VD	☐ DELETE		3.1 TITLE	VD - VICE PRESIDENT	☐ Change	☒ Addition
NAME	GORE, JERRY			3.2 NAME	JAMES F. McMAHON		
STREET ADDRESS	1609 S DIXIE HWY			3.3 STREET ADDRESS	57 S. SEWALL'S POINT ROAD		
CITY-ST-ZIP	STUART FL 34994			3.4 CITY-ST-ZIP	STUART, FL. 34996		
TITLE	TD	☒ DELETE		4.1 TITLE		☐ Change	☐ Addition
NAME	GARLAND, YVES PAUL			4.2 NAME			
STREET ADDRESS	3026 SE GLASGOW DR			4.3 STREET ADDRESS			
CITY-ST-ZIP	STUART FL 34997			4.4 CITY-ST-ZIP			
TITLE	SD	☐ DELETE		5.1 TITLE		☐ Change	☐ Addition
NAME	WOJCIESZAK, CHRIS			5.2 NAME			
STREET ADDRESS	1868 N.E. OCEAN BLVD.			5.3 STREET ADDRESS			
CITY-ST-ZIP	STUART FL 34997			5.4 CITY-ST-ZIP			
TITLE		☐ DELETE		6.1 TITLE		☐ Change	☐ Addition
NAME				6.2 NAME			
STREET ADDRESS				6.3 STREET ADDRESS			
CITY-ST-ZIP				6.4 CITY-ST-ZIP			

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Robert Wood MacCurry, Treasurer DATE 2/2/99 561-223-5843

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E037 (11/98)