2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT#731038

Entity Name: SERTOMA CLUB OF MARTIN COUNTY, INC.

FILED Apr 29, 2002 8:00 AM Secretary of State

Current Principal Place of Business: New Principal Place of Business: 851 JOHNSON AVENUE P.O. BOX 202 STUART, FL 34995 **Current Mailing Address: New Mailing Address:** 851 JOHNSON AVENUE P.O. BOX 202 STUART, FL 34995 US FEI Number: 23-7396505 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: PERRY, STEVEN L 2081 E OCEAN BLVD STUART, FL 34995 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: DP () Delete (X) Change () Addition DAVIS, GARY Name: DAVIS, GARY Name: 2482 SE VICTORY AVE Address: 2482 SE VICTORY AVE Address: City-St-Zip: PORT SAINT LUCIE, FL 34952 City-St-Zip: PORT SAINT LUCIE, FL 34952 Title: DD () Delete Title: DD (X) Change () Addition CARSON, WILLIAM Name: LECATES, DAVE Name: Address: 4149 SE SALERNO RD Address: 928 CENTRAL PARKWAY City-St-Zip: STUART, FL 34997 City-St-Zip: STUART, FL 34994 Title: DD () Delete Title: () Change () Addition CORLEY, JEFF Name: Name: Address: 1117 E OSCEOLA RD Address: City-St-Zip: PORT SALERNO, FL 34997 City-St-Zip: Title: DD () Delete Title: DP (X) Change () Addition SHARKEY, KEVIN Name: Name: SHARKEY, KEVIN Address: 3012 SE JAY ST Address: 3012 SE JAY ST City-St-Zip: STUART, FL 34997 City-St-Zip: STUART, FL 34997 Title: () Delete Title: (X) Change () Addition WADE, GEOFFREY MUZZO, ROBERT Name: Name: P O BOX 880445 950 S. KANNER HIGHWAY Address: Address: PORT SAINT LUCIE, FL 349880445 City-St-Zip: City-St-Zip: STUART, FL 34994 Title: () Delete Title: () Change () Addition AHERN JACK Name: Name: Address: 2233 S KANNER HWY Address:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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.

City-St-Zip:

SIGNATURE: KEVIN SHARKEY DP 04/29/2002

STAURT, FL 34994

City-St-Zip: