2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 731253

FILED Aug 22, 2007 Secretary of State

Entity Name: MARTIN COUNTY AMATEUR RADIO ASSOCIATION, INC.

Current Principal Place of Business:		New Principal Place of Business:
P.O. BOX 1 STUART, F		1055 SE PONDEROSA RD. STUART, FL 34997
Current Ma	ailing Address:	New Mailing Address:
P.O. BOX 1 STUART, F		
In accordanc	59-2380671 FEI Number Applied For () se with s. 607.193(2)(b), F.S., the corporation did Address of Current Registered Agent:	FEI Number Not Applicable () Certificate of Status Desired (X) not receive the prior notice. Name and Address of New Registered Agent:
LEE, WILLI 1055 SE PO STUART, F	IAM D ONDEROSA RD FL 34997 US	purpose of changing its registered office or registered agent, or both,
	e of Florida.	purpose of changing its registered office of registered agent, or both,
SIGNATUR		
	Electronic Signature of Registered A	•
OFFICERS	S AND DIRECTORS:	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:
Title: Name: Address: City-St-Zip:	D () Delete DEACON, NANCY 577 RIVERWAY BLVD PALM CITY, FL 34990	Title: () Change () Addition Name: Address: City-St-Zip:
Title: Name: Address: City-St-Zip:	D () Delete DEACON, WILLIAM 577 RIVERWAY BLVD PALM CITY, FL 34990	Title: () Change () Addition Name: Address: City-St-Zip:
Title: Name: Address: City-St-Zip:	V () Delete KIRSCH, JEFFREY 3711 SW SUNSET TRACE CIR PALM CITY, FL 34990	Title: () Change () Addition Name: Address: City-St-Zip:
Title: Name: Address: City-St-Zip:	T () Delete LEE, WILLIAM D 1055 SE PONDEROSA RD STUART, FL 34997	Title: () Change () Addition Name: Address: City-St-Zip:
Title: Name: Address: City-St-Zip:	P () Delete SHIELDS, DOUG 1450 SE 11TH ST STUART, FL 34996	Title: () Change () Addition Name: Address: City-St-Zip:
Title: Name: Address: City-St-Zip:	D () Delete BERGES, GUSTAVO 486 FETTERBUSH WAY JENSEN BEACH, FL 34957	Title: D (X) Change () Addition Name: SAWYER, JOSEPH Address: 1622 WATERFALL BLVD City-St-Zip: PALM CITY, FL 34990

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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.

SIGNATURE: WILLIAM D. (WOODY) LEE T 08/22/2007