

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 734697

FILED  
Jun 25, 2009  
Secretary of State

Entity Name: MARTIN COUNTY 4-H FOUNDATION, INC.

**Current Principal Place of Business:**

2614 S.E. DIXIE HIGHWAY  
STUART, FL 349964007

**New Principal Place of Business:**

**Current Mailing Address:**

2614 S.E. DIXIE HIGHWAY  
STUART, FL 349964007

**New Mailing Address:**

FEI Number: 59-1641477      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )  
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

**Name and Address of Current Registered Agent:**

**Name and Address of New Registered Agent:**

HARRIS, LUCINDA  
2614 S.E. DIXIE HWY.  
STUART, FL 34996      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: DT      ( ) Delete  
Name: MINEAR, JUDSON  
Address: 2614 SE DIXIE HWY  
City-St-Zip: PALM CITY, FL 34996

Title: S      ( ) Delete  
Name: CROMER, BO  
Address: 1414 SW 33RD STREET  
City-St-Zip: PALM CITY, FL 34990

Title: BM      ( ) Delete  
Name: BAKER, KAREN  
Address: PO BOX 911  
City-St-Zip: STUART, FL 34995

Title: DP      ( ) Delete  
Name: OVERTON, JAMES  
Address: 2614 SE DIXIE HWY  
City-St-Zip: STUART, FL 34996

Title: BM      ( ) Delete  
Name: WHITE-PANERO, STACEY  
Address: PO BOX 503  
City-St-Zip: INDIANTOWN, FL 34956

Title: MD      (X) Delete  
Name: KILBRIDE, CHRIS  
Address: 2614 SE DIXIE HWY  
City-St-Zip: STUART, FL 34996

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: MD      (X) Change ( ) Addition  
Name: KILBRIDE, CHRIS  
Address: 2614 SE DIXIE HWY  
City-St-Zip: STUART, FL 34996

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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: JUDSON MINEAR

DT

06/25/2009

Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date