

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 11, 2005 8:00 am
Secretary of State

03-11-2005 90321 024 ****61.25

DOCUMENT # 739315

1. Entity Name
THE ARC OF MARTIN COUNTY INC.



Principal Place of Business
**2001 SOUTH KANNER HIGHWAY
STUART, FL 34994 US**

Mailing Address
**2001 SOUTH KANNER HIGHWAY
STUART, FL 34994 US**

50025227



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

02212005 Chg-NP

CR2E037 (10/03)

4. FEI Number
59-6153484

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

**MUNIZ, KEITH W
2001 SOUTH KANNER HWY
STUART, FL 34994**

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**Filing Fee is \$61.25
Due by May 1, 2005**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

**Make check payable to
Florida Department of State**

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**COB
KOTCH, ED
4895 MARINER VILLAGE LANE
STUART, FL 34997** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**VC
LASS, JOHN M
1700 SE MONTEREY ROAD
STUART, FL 34996** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**S
HEMPEL, JO
P.O. BOX 745
STUART, FL 34995** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**T
AUMACK, NANCY E
1301 SE PORT ST. LUCIE BLVD.
PORT ST. LUCIE, FL 34952** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**D
TURRELL, RICHARD
114 SE TURTLE CREEK DR
JUPITER, FL 33469** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**D
MELOSH, RICHARD
132 S SEWALLS POINT RD
SEWALLS POINT, FL 36996** ☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**D
Kotch, Ed
4895 Mariner Village Lane
Stuart, FL 34997** ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**COB
LASS, John M.
1700 SE Monterey Rd
Stuart, FL 34996** ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**T
Hempel, Jo
P.O. Box 745
Stuart, FL 34995** ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**VC
Aumack, Nancy E
1301 SE Port St. Lucie Blvd
Port St. Lucie, FL 34952** ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**S
Haunton, Robert N.
2752 Bear Paw Trail
Palm City, FL 34990** ☐ Change ☒ Addition

12. 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

Keith W. Muniz, CEO

2-22-05

(771) 283-2525