

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 750504

1. Entity Name

THE LANDINGS OF MARTIN COUNTY ASSOCIATION, INC.

FILED
Mar 01, 2000 8:00 am
Secretary of State

03-01-2000 90033 037 ****61.25

Principal Place of Business

Mailing Address

4191 S. E. LUCIE BLVD.
P.O. BOX 2188
STUART FL 34995

SOUND MANAGEMENT SERVICES
P.O. BOX 2188
STUART FL 34995-2188



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

59-2264946

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

WRIGHT, ELLEN C
611 SOUTH FEDERAL HWY
STE C
STUART FL 34994

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.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW:
FEES IS \$61.25

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make Check Payable to
Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	PD	☐ Delete
NAME	CHASMAR, GEORGE	
STREET ADDRESS	P.O. BOX 364 N/A	
CITY-ST-ZIP	PT SALERNO FL 34992	
TITLE	VPD	☒ Delete
NAME	SMITH, RAYMOND	
STREET ADDRESS	2453 SE DIXIE HWY	
CITY-ST-ZIP	STUART FL 33996	
TITLE	SD	☐ Delete
NAME	HAAGENSON, ROBERT	
STREET ADDRESS	4171 SE ST LUCIE BLVD	
CITY-ST-ZIP	STUART FL 34997	
TITLE	TD	☐ Delete
NAME	RANGE, THOMAS	
STREET ADDRESS	4199 S.E. ST LUCIE BLVD	
CITY-ST-ZIP	STUART FL 34997	
TITLE	D	☐ Delete
NAME	COOK, ROBERT	
STREET ADDRESS	4173 SE ST LUCIE BLVD	
CITY-ST-ZIP	STUART FL 34997	
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE	SD	☐ Change ☒ Addition
NAME	Lubitz, Bernard	
STREET ADDRESS	4181 SE St. Lucie Blvd.	
CITY-ST-ZIP	Stuart, FL 34997	
TITLE	VPD	☒ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

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: George Chasmar, Pres.

2/22/2000

SIGNATURE AND TYPE OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (9/99)