## 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## Apr 18, 2007 8:00 am Secretary of State **DOCUMENT #765702** 04-18-2007 90195 019 \*\*\*\*61.25 MARTIN COUNTY TAXPAYER'S ASSOCIATION, INC. Principal Place of Business Mailing Address 310 WEST 1ST STREET 310 WEST 1ST STREET P.O. BOX 741 P.O. BOX 741 STUART, FL 34995-7741 STUART, FL 34995-7741 2. Principal Place of Business - No P.O. Box 141 .O. Box 853 Monterel Commons Apt. #, etc. 04112007 Cha-NP CR2E037 (12/06) FEI Number 59-2652202 Applied For Not Applicable \$8.75 Additional Country 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent James SUNDHEIM JR, FREDERICK G Street Address (P.O. Box Number is Not Acceptable) 310 WEST 1ST STREET STUART, FL 34994 853 SE Monterey Commons 8. The above named entity submits this statement for the purpose of charging 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 agent and title if applic Make check payable to 9. Election Campaign Financing Filing Fee is \$61.25 \$5.00 May Be Florida Department of State Trust Fund Contribution. Due by May 1, 2007 Added to Fees OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10 11. ☐ Addition Delete TITLE ☐ Change TITI F DEWINDT, KATHY NAME 4500 SW LA PALMONA DR STREET ADDRESS STREET ADDRESS CITY-ST-ZIP PALM CITY, FL 34990 CITY-ST-ZIP Delete ☐ Change ☐ Addition TITLE WILLIAMS, JR., ROBERT L NAME OF 6900 SE LILLIAN COURT STREET ADDRESS STREET ADDRESS CITY-ST-ZIP STUART, FL 34997 CITY-ST-ZIP VPD ☐ Delete PD Change ☐ Addition TITLE TITLE NAME PICKARD, DON 7781 SE LUCINDA LN STREET ADDRESS STREET ADDRESS CITY-ST-ZIP HOBE SOUND, FL 33455 CITY-ST-ZIP □ Change ☐ Addition MLE ☐ Delete GEISINGER, RICHARD C NAME NAME STREET ADDRESS 1648 SE SAILFISH BLVD STREET ADDRESS CITY-ST-ZIP STUART, FL 34996 CITY-ST-ZIP ☐ Change **Addition** TITLE ☐ Defete IIILE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete ☐ Change ☐ Addition TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIE 12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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:

FILED

OGDEN UT

## ATTACHMENT

Date of this notice:

NOV. 15, 2004

Taxpayer Identifying Number 990 Form:

Tax Period:

59-8652292 DCT. 31, 2001

For assistance you may call us at:

1-877-829-5500

001346.163367 0005 001 2 AT 0.517 1495

Department of the Treasury

Internal Revenue Service

84201-0046

HELPFUL HINT: FOR FASTER SERVICE, TRY CALLING US ANY DAY EXCEPT MONDAY WHEN DUR CALL VOLUMES ARE HIGHEST.



001346

MARTIN COUNTY TAXPAYERS ASSN INC PO BOX 741 STUART FL 34995-0741413

## DO YOU NEED TO FILE A FORM 990?

OUR RECORDS INDICATE THAT YOU HAVE NOT FILED FORM 990 RECENTLY. THE PURPOSE OF THIS NOTICE IS TO REMIND YOU OF THE ANNUAL FILING REQUIREMENTS FOR TAX-EXEMPT ORGANIZATIONS AND TO CONFIRM THAT YOU CONTINUE TO BE EXEMPT FROM THIS FILING.

MOST ORGANIZATIONS EXEMPT FROM FEDERAL INCOME TAX UNDER THE INTERNAL REVENUE CODE MUST FILE AN ANNUAL INFORMATION RETURN ON FORM 990, RETURN OF ORGANIZATION EXEMPT FROM INCOME TAX, IF THEIR ANNUAL GROSS RECEIPTS ARE NORMALLY MORE THAN \$25,000. ORGANIZATIONS REQUIRED TO FILE MAY USE THE SIMPLER FORM 990-EZ, SHORT FORM RETURN OF ORGANIZATION EXEMPT FROM INCOME TAX, FOR ANY YEAR THEIR GROSS RECEIPTS MERE LESS THAN \$100,000 AND THEIR END-OF-YEAR ASSETS WERE LESS THAN \$250,000. (SEE "DEFINITIONS" BELOW FOR CLARIFICATION.) TAX-EXEMPT ORGANIZATIONS WHOSE ANNUAL GROSS RECEIPTS ARE NORMALLY BELOW \$25,000 ARE NOT REQUIRED TO FILE.

YOU ORIGINALLY INFORMED US THAT YOUR ANNUAL GROSS RECEIPTS WERE NORMALLY BELOW \$25,000. IF YOUR FINANCIAL STATUS HAD CHANGED DURING THIS PERIOD AND YOU WERE REQUIRED TO FILE A FORM 990 BUT DID NOT DO SO, YOU MAY BE CHARGED A PENALTY.

AN ORGANIZATION WITH GROSS RECEIPTS OF LESS THAN \$1,000,000 THAT IS REQUIRED TO FILE A FORM 990 BUT DOES NOT DO SO BY THE DUE DATE OF THE RETURN. (INCLUDING ANY EXTENSIONS) MAY BE SUBJECT TO A PENALTY OF \$20 PER DAY FOR EACH DAY THE RETURN IS LATE, UP TO A MAXIMUM OF \$10,000 OR 5 PERCENT OF ITS GROSS RECEIPTS FOR THE YEAR, WHICHEVER IS LESS. IF THE ORGANIZATION'S GROSS RECEIPTS ARE \$1,000,000 OR MORE BUT WHICHEVER IS LESS. IF THE GROWNIZATION'S GROSS RECEIPTS ARE \$1,000,000 OR HORE 801 IT DOES NOT FILE A FORM 990 BY THE DUE DATE OF THE RETURN (INCLUDING ANY EXTENSIONS), IT MAY BE SUBJECT TO A PENALTY OF \$100 PER DAY FOR EACH DAY THE RETURN IS LATE, UP TO A MAXIMUM OF \$50,000 ON 5 PERCENT OF TTS GROSS RECEIPTS FOR THE YEAR, WHICHEVER IS LESS. THE PENALTY IS NOT CHARGED IF THE ORGANIZATION CAN SHOW THAT NOT FILING ON TIME WAS DUE TO REASONABLE CAUSE

10 HELP US UPDATE OUR RECORDS, PLEASE CHECK THE APPROPRIATE BOX ON THE SECOND CACC OF THIS NOTICE AND PROVIDE THE RETURNS OR OTHER INFORMATION REQUESTED. IF YOU WERE RECOGNIZED AS A SECTION SOLCO(S) DEGANIZATION. YOU MUST INCLUDE A SCHEDULE A 1F YOU ARE REQUIRED TO FILE A FORM 990. BLANK FORMS 990, FORMS 990-EZ, AND INSTRUCTIONS ARE AVAILABLE THROUGH THE IRS WEBSITE (HWW.IRS.60V) OR BY CALLING 1-800-829-3675.

PLEASE RETURN THIS NOTICE TO US WITHIN 30 DAYS. AN ENVELOPE IS ENCLOSED FOR YOUR CONVENIENCE. THE COPY OF THIS NOTICE IS FOR YOUR RECORDS. NOT COMPLYING WITH OUR REQUEST FOR INFORMATION COULD RESULT IN THE LOSS OF YOUR TAX-EXEMPL STATUS AND REMOVAL FROM PUBLICATION 76 (CUMULATIVE LIST OF DREANLZATIONS DESCRIBED IS SECTION 170(C) OF THE INTERNAL REVENUE CODE OF 1986).

THANK YOU FOR YOUR COOPERATION.