

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000004929

FILED
Apr 29, 2011
Secretary of State

Entity Name: ECONOMIC DEVELOPMENT COUNCIL OF ST. LUCIE COUNTY, INC.

Current Principal Place of Business:

1850 SW FOUNTAINVIEW BLVD
SUITE 205
PORT SAINT LUCIE, FL 34986

New Principal Place of Business:

Current Mailing Address:

1850 SW FOUNTAINVIEW BLVD
SUITE 205
PORT SAINT LUCIE, FL 34986

New Mailing Address:

FEI Number: 65-1058626

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PELTON, LARRY L
1850 SW FOUNTAINVIEW BLVD
STE 205
PORT SAINT LUCIE, FL 34986 US

Name and Address of New Registered Agent:

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: T
Name: SMITH, RODNEY
Address: LAWNWOOD HOSPITAL, 1700 SOUTH 23RD ST
City-St-Zip: FORT PIERCE, FL 34950

Title: CHAI
Name: SKILES, DAVE
Address: 1ST PEOPLES BNK, 1301 SE PT ST LUCIE BLVD
City-St-Zip: PORT SAINT LUCIE, FL 34952

Title: SECY
Name: HOUGHTEN, RICHARD
Address: TPIMS, 11350 SW VILLAGE PARKWAY
City-St-Zip: PORT SAINT LUCIE, FL 34987

Title: CE
Name: BRAY, NATE
Address: BRAY REALTY ADVISORS LLC
City-St-Zip: 7450 LIVERPOOL COURT BOYNTON, FL 33472

I hereby 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 all other like empowered.

SIGNATURE: LARRY PELTON

PRES

04/29/2011

Electronic Signature of Signing Officer or Director

Date