2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00671

Apr 22, 2008 Secretary of State

Entity Name: NAMI MARTIN COUNTY, INC.

US

Current Principal Place of Business: New Principal Place of Business:

1950 SW PALM CITY ROAD APT 1-104 STUART, FL 349951082 US

New Mailing Address: Current Mailing Address:

P.O. BOX 1082 STUART, FL 34995

FEI Number: 59-2444160 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

TAYLOR, THOMAS R 1950 PALM CITY ROAD APT 1-104 STUART, FL 34994 US

OFFICERS AND DIRECTORS:

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

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

() Delete (X) Change () Addition

TAYLOR, THOMAS R TAYLOR, THOMAS R Name: Name: 1950 PALM CITY RD APT 1104 Address: 1950 PALM CITY RD APT 1104 Address: City-St-Zip: STUART, FL 34994 City-St-Zip: STUART, FL 34994 US

Title: () Delete Title: (X) Change () Addition Name: TAYLOR, MARGARET E Name: TAYLOR, MARGARET E

Address: 1950 PALM CITY ROAD APT 1104 Address: 1950 PALM CITY ROAD APT 1104

City-St-Zip: STUART, FL 34994 City-St-Zip: STUART, FL 34994 US

Title: () Delete Title: **VPD** (X) Change () Addition LOWENSTEIN, MICHEAL DIXON, BARBARA Name: Name:

208 EVERGLADES BLVD Address: 567 NW AZINE AVE Address: City-St-Zip: PORT SAINT LUCIE, FL 34983 City-St-Zip: STUART, FL 34994 US

Title: () Delete Title: PD () Change (X) Addition

Name: Name: BAKER, PAMELA

1775 SW ST ANDREWS DRIVE Address: Address: City-St-Zip: City-St-Zip: PALM CITY, FL 34990 US

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: THOMAS R TAYLOR TD 04/22/2008