

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00671

FILED  
Apr 05, 2012  
Secretary of State

Entity Name: NAMI MARTIN COUNTY, INC.

**Current Principal Place of Business:**

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

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 1082  
STUART, FL 34995 US

**New Mailing Address:**

FEI Number: 59-2444160

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

TAYLOR, THOMAS R  
1950 PALM CITY ROAD  
APT 1-104  
STUART, FL 34994 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: TD  
Name: TAYLOR, THOMAS R  
Address: 1950 PALM CITY RD APT 1104  
City-St-Zip: STUART, FL 34994 US

Title: SD  
Name: TAYLOR, MARGARET E  
Address: 1950 PALM CITY ROAD APT 1104  
City-St-Zip: STUART, FL 34994 US

Title: VPD  
Name: DIXON, BARBARA  
Address: 208 EVERGLADES BLVD  
City-St-Zip: STUART, FL 34994 US

Title: PD  
Name: BAKER, PAMELA  
Address: 1775 SW ST ANDREWS DRIVE  
City-St-Zip: PALM CITY, FL 34990 US

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: THOMAS R. TAYLOR

TD

04/05/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date