2005 NOT-FOR-PROFIT CORPORATION **ANNUAL REPORT (AR)**

Feb 28, 2005 8:00 am **Secretary of State** DOCUMENT # N01000003153 1. Entity Name 02-28-2005 90218 015 ****61.25 MARTIN COUNTY COMMUNITY VIEWPOINT, INC. Principal Place of Business Mailing Address 3748 WOODBRIAR LANE 3748 WOODBRIAR LANE PALM CITY FL 34990 PALM CITY FL 34990 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 1st MOORE CR2E037 (10/04) City & State City & State Applied For NO-T APPLICABLE Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent SUMMERS, WILLIAM C Street Address (P.O. Box Number is Not Acceptable) 3748 WOODBRIAR LANE PALM CITY FL 34990 City Zip Code FL 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE Signature, typed or printed name of registered agent and little if applicable. (NOTE: Registered Agent signature required when reinstating) FILE NOW: FEE IS \$61.25 9. Election Campaign Financing \$5.00 May Be Make Check Payable to Trust Fund Contribution. Due By May 1, 2005 🚉 Added to Fees Florida Department of State 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 11. ☐ Delete ☐ Change TITLE SUMMERS, WILLIAM C Joe NAME Florio, 433 NE ACACIA PIACE 3748 WOODBRIAR LANE STREET ADDRESS STREET ADDRESS PALM CITY FL 34990 CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Defete TITLE ☐ Change ☐ Addition KELLY, ALLEN NAME NAME 12866 SE PINEHURST CT STREET ADDRESS STREET ADDRESS HOBE SOUND FL 33455 CITY-ST-ZIP CITY-ST-ZIP Delete TITLE Спалое ☐ Addition SUMMERS, DOLORES NAME NAME 3748 WOODBRIAR LANE STREET ADORESS STREET ADDRESS PALM CITY FL 34990 CITY-ST-ZIP ÇITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change Addition LENNON, ROBERT NAME 2897 SW MARAPOSA CIR STREET ADDRESS STREET ADDRESS PALM CITY FL 34990 CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete THILE ☐ Change Addition HANNAH, LINDA NAME NAME 3553 SE FAIRWAY E STREET ADDRESS STREET ADDRESS STUART FL 34997 CITY-ST-ZIP CITY-ST-7P TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS

FILED

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.

CHTY-ST-ZIP

CITY-ST-7IP