2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 05, 2009
Secretary of State

DOCUMENT# N01000006177

Entity Name: SOUTH MARTIN CONSERVATION ALLIANCE, INC.

Current Principal Place of Business:

PO BOX 909
HOBE SOUND, FL 33475

New Principal Place of Business:

C/O LOU ANN PRESTEGARD
8931 SE EAGLE AVENUE
HOBE SOUND, FL 33455

Current Mailing Address:

PO BOX 909
HOBE SOUND, FL 33475

New Mailing Address:

FEI Number: 01-0583485 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

STRAWBRIDGE, JOHN
122 S BCH RD
HOBE SOUND, FL 33455 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: D ( ) Delete
Name: FIELD, MARSHALL
Address: 342 S BEACH RD
City-St-Zip: HOBE SOUND, FL 33455

Title: D ( ) Delete
Name: STRAWBRIDGE, JOHN
Address: 122 S BEACH RD
City-St-Zip: HOBE SOUND, FL 33455

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

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: JOHN STRAWBRIDGE D 03/05/2009

Electronic Signature of Signing Officer or Director — Date