2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Aug 18, 2005
Secretary of State

DOCUMENT# N04000004770

Entity Name: MARTIN COUNTY FIRE RESCUE HONOR GUARD INC.

Current Principal Place of Business:

6000 TOWER DR
STUART, FL 34997

New Principal Place of Business:

Current Mailing Address:

6000 TOWER DR
STUART, FL 34997

New Mailing Address:

FEI Number: 26-0095198 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

SCHLAWIEDT, SCOTT
6000 TOWER DR
STUART, FL 34997 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: SCHLAWIEDT, SCOTT COMMAND
Address: % 6000 TOWER DR
City-St-Zip: STUART, FL 34997

Title: D ( ) Delete
Name: HALL, CHRIS SQUAD L
Address: % 6000 TOWER DR
City-St-Zip: STUART, FL 34997

Title: D ( ) Delete
Name: RICHARDSON, JOHN SQUAD L
Address: % 6000 TOWER DR
City-St-Zip: STUART, FL 34997

Title: T ( ) Delete
Name: HALL, PRISCILLA
Address: % 6000 TOWER DR
City-St-Zip: STUART, FL 34997

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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 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 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: PRISCILLA HALL T 08/18/2005

Electronic Signature of Signing Officer or Director — Date