

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08000002822

FILED
Jan 16, 2009
Secretary of State

Entity Name: MARTIN COUNTY OHV CLUB, INC.

Current Principal Place of Business:

7749 SW ELLIPSE WAY
STUART, FL 34997

New Principal Place of Business:

Current Mailing Address:

7749 SW ELLIPSE WAY
STUART, FL 34997

New Mailing Address:

FEI Number: 30-0484733

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

VAN VONNO, FRED W ESQ.
% WACKEEN & DUNGEY, BEARD, SOBEL, BUSH &
3473 SE WILLOUGHBY BLVD.
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: PD () Delete
Name: WOOD, CARIG A
Address: 6526 S. KANNER HWY #300
City-St-Zip: STUART, FL 34997

Title: VD () Delete
Name: BREWSTER, ROBERT T JR
Address: 1722 DORCHSTER PLACE
City-St-Zip: WELLINGTON, FL 33414

Title: D () Delete
Name: DIEKMAN, WADE
Address: 525 S.W. RUSTIC CIRCE
City-St-Zip: STUART, FL 34997

Title: ST () Delete
Name: WOOD, MILDRED
Address: 7749 SW ELLIPSE WAY
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 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: ROBERT T BREWSTER JR

VD

01/16/2009

Electronic Signature of Signing Officer or Director

Date