

2002 UNIFORM BUSINESS REPORT (UBR)

4/1

FILED
May 27, 2002 8:00 am
Secretary of State

04-10-2002 90755 017 ****61.25

DOCUMENT # N14391

1. Entity Name

BIG BROTHERS AND BIG SISTERS OF MARTIN COUNTY, I NC.

Principal Place of Business

Mailing Address

5033 S.E. FEDERAL HWY
 STUART FL 34997
 US

5033 S.E. FEDERAL HWY
~~101 E. OSCEOLA STREET, SUITE 102~~
 STUART FL 34997
 US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

STUART FL

34997

US

4. FEI Number

59-2676889

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

CORNETT, JANE L.

401 E. OSCEOLA STREET

SUITE 102

STUART FL 33494

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW: FEE IS \$61.25

9. Election Campaign Financing Trust Fund Contribution.

\$5.00 May Be Added to Fees

Make Check Payable to Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE PD
 NAME LINDSAY, JOHN Delete
 STREET ADDRESS P.O. BOX 176
 CITY-ST-ZIP INDIANTOWN FL 34956

TITLE
 NAME Change Addition
 STREET ADDRESS
 CITY-ST-ZIP

TITLE V
 NAME LACEY, THEA Delete
 STREET ADDRESS MARTIN SCHOOL DISTRICT P.O. BOX 947
 CITY-ST-ZIP PT. SALERNO FL 34992

TITLE
 NAME Change Addition
 STREET ADDRESS
 CITY-ST-ZIP

TITLE MD
 NAME DECKER, ELAINE Delete
 STREET ADDRESS 197 SW MONTEREY ROAD
 CITY-ST-ZIP STUART FL

TITLE
 NAME Change Addition
 STREET ADDRESS
 CITY-ST-ZIP

TITLE TD
 NAME ANN VEGA, RUTH Delete
 STREET ADDRESS 10770 SE FEDERAL HWY
 CITY-ST-ZIP HOBE SOUND FL 33455

TITLE
 NAME Change Addition
 STREET ADDRESS
 CITY-ST-ZIP

TITLE V
 NAME WEBSTER, JEANNINE Delete
 STREET ADDRESS 1943 S.W. AUTUMAN WOOD WAY
 CITY-ST-ZIP PALM CITY FL 34990

TITLE
 NAME Change Addition
 STREET ADDRESS
 CITY-ST-ZIP

TITLE
 NAME Delete
 STREET ADDRESS
 CITY-ST-ZIP

TITLE SD
 NAME Debra Banta
 STREET ADDRESS 500 E Ocean Blvd
 CITY-ST-ZIP Stuart, FL 34994 Change Addition

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.

SIGNATURE:

Elaine Decker
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/2/02

772-283-8373

EX-1011/D.R.

Date

Daytime Phone #

CR2E037 (9/01)