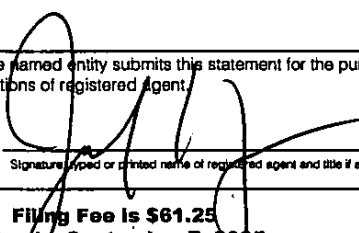
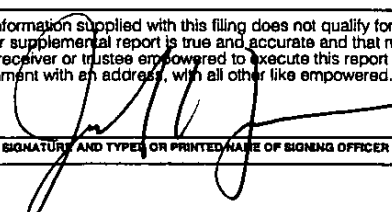


2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Aug 15, 2005 8:00 am
Secretary of State

08-15-2005 90082 025 ****61.25

DOCUMENT # N22530 1. Entity Name ST. LUCIE COUNTY BAR ASSOCIATION, INC.					
Principal Place of Business P.O. BOX 3014 FT PIERCE, FL 34948			Mailing Address P.O. BOX 3014 FT PIERCE, FL 34948		
2. Principal Place of Business		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State			
Zip	Country	Zip	Country	4. FEI Number 65-0008027	
				Applied For ☐ Not Applicable	
				5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent KEITH PICKERING 323 SOUTH 2ND STREET FORT PIERCE, FL 34950			7. Name and Address of New Registered Agent Name Joel C. Zwemer Street Address (P.O. Box Number is Not Acceptable) 1903 South 25th Street Suite 200 City Fort Pierce FL Zip Code 34947		
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  Joel C. Zwemer 08/12/05 Signature typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE					
Filing Fee is \$61.25 Due by September 7, 2005		9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees		Make check payable to: Florida Department of State	
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	STD ZWEMER, JOEL C 1903 S 25TH ST., STE. 200 FORT PIERCE, FL 34947	☐ Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PED LLOYD, IAN 302S 2ND ST. FORT PIERCE, FL 34950	☒ Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD PICKERING, KEITH 323 S. 2ND ST FORT PIERCE, FL 34950	☒ Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD Griffin, John Kevin 133 S. 2nd St., Ste. 202 Fort Pierce, FL 34950	☒ Change ☐ Addition			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD Gould, Brad 1903 S. 25th St., Ste. 200 Fort Pierce, FL 34947	☒ Change ☐ Addition			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD Gitlen, Richard 611 S. Federal Hwy., Ste. G Stuart, FL 34994-2925	☒ 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: 		Joel C. Zwemer, President 08/12/05 (772) 464-7700			
SIGNATURE AND TYPE OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		Date Daytime Phone #			