

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N24558

FILED
Apr 13, 2009
Secretary of State

Entity Name: MARTIN COUNTY COMMUNITY FOUNDATION, INC.

Current Principal Place of Business:

C/O FLOYD D. JORDAN
759 S. FEDERAL HWY.
STUART, FL 34994 US

New Principal Place of Business:

Current Mailing Address:

C/O CROOK, T MICHAEL
33 FLAGLER AVE
STUART, FL 34994 US

New Mailing Address:

FEI Number: 65-0024020

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

JORDAN, FLOYD D
759 S. FEDERAL HWY
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: JORDAN, FLOYD D.
Address: 759 S. FEDERAL HWY.
City-St-Zip: STUART, FL

Title: D () Delete
Name: FOWLER, WILLIAM C
Address: 103 SE FLAMINGO AVE.
City-St-Zip: STUART, FL

Title: D () Delete
Name: WEBER, THOMAS E, JR.
Address: 1939 S FEDERAL HWY
City-St-Zip: STUART, FL

Title: D () Delete
Name: CROOK, T M
Address: 33 FLAGLER AVE
City-St-Zip: STUART, FL 34994

Title: D () Delete
Name: CRARY, ANN
Address: 1 WENDY LANE
City-St-Zip: STUART, FL 34996

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:

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: JORDAN, FLOYD D.

PD

04/13/2009

Electronic Signature of Signing Officer or Director

Date