

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N37093

FILED
Mar 28, 2007
Secretary of State

Entity Name: REAL PROPERTY COUNCIL OF MARTIN COUNTY, INC.

Current Principal Place of Business:

% RICHARD J. DUNGEY
3473 S.E. WILLOUGHBY BLVD.
STUART, FL 34994

New Principal Place of Business:

Current Mailing Address:

% RICHARD J. DUNGEY
3473 S.E. WILLOUGHBY BLVD.
STUART, FL 34994

New Mailing Address:

FEI Number: 59-2624086

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DUNGEY, RICHARD J.
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: VD () Delete
Name: RIFKIN, AVRON C
Address: 800 SE MONTEREY COMMONS BLVD, STE 200
City-St-Zip: STUART, FL 34994

Title: PD () Delete
Name: HARVIN, WESLEY R II
Address: 900 E OCEAN BVD STE 210B
City-St-Zip: STUART, FL 34994

Title: TD () Delete
Name: THURLOW, THOMAS H III
Address: 17 E MARTIN L KING JR BLVD
City-St-Zip: STUART, FL 34995

Title: SD () Delete
Name: CORNETT, JANE
Address: 401 E OSCEOLA ST
City-St-Zip: STUART, FL 34994

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 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: WESLEY R. HARVIN, II

PD

03/28/2007

Electronic Signature of Signing Officer or Director

Date