2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N45442

FILED Mar 10, 2009 Secretary of State

Entity Name: MARTIN COUNTY HOTEL AND MOTEL ASSOCIAITON, INC. **Current Principal Place of Business: New Principal Place of Business:** P.O. BOX 566 1209 SE FEDERAL HIGHWAY STUART, FL 34995 STUART, FL 34994 **Current Mailing Address: New Mailing Address:** P.O. BOX 566 STUART, FL 34995 FEI Number: FEI Number Applied For () FEI Number Not Applicable (X) Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: BALLANTYNE, AUDREY 1200 SOUTH FEDERAL HIGHWAY STUART, FL 34994 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: (X) Change () Addition () Delete RUTZKE, FRED LEWIS, JACQUE Name: Name: Address: 2625 NE INDIAN RIVER DRIVE Address: 7615 SW LOST RIVER ROAD City-St-Zip: JENSEN BEACH, FL 34957 City-St-Zip: STUART, FL 34997 Title: () Delete Title: () Change () Addition Name: CALVERT, CHARLES Name: Address: 1209 S FEDERAL HIGHWAY Address: City-St-Zip: STUART, FL 34994 City-St-Zip: Title: () Delete Title: () Change () Addition BALLANTYNE, AUDREY Name: Name: 1200 SOUTH FEDERAL HIGHWAY Address: Address: City-St-Zip: STUART, FL 34994 City-St-Zip: Title: SD () Delete Title: SD (X) Change () Addition Name: DONOVAN, KARYN Name: BERNADIN, NADAGE 300 SW MONTEREY ROAD Address: Address: 1200 SE FEDERAL HIGHWAY City-St-Zip: STUART, FL 34994 City-St-Zip: STUART, FL 34994

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: AUDREY BALLANTYNE P 03/10/2009