## 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N47221

Apr 21, 2009 Secretary of State

Entity Name: PORT ST. LUCIE BAR ASSOCIATION, INC.

**Current Principal Place of Business: New Principal Place of Business:** 

1858 SE PORT ST. LUCIE BLVD 1331 SE PORT ST. LUCIE BLVD PORT ST. LUCIE, FL 34986

SUITE 102

PORT ST. LUCIE, FL 34952

**Current Mailing Address: New Mailing Address:** 

1331 SE PORT ST. LUCIE BLVD 1858 SE PORT ST. LUCIE BLVD PORT ST. LUCIE, FL 34986

SUITE 102

PORT ST. LUCIE, FL 34952

FEI Number: 65-0307854 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

Name and Address of New Registered Agent: Name and Address of Current Registered Agent:

GOLDMAN, DIANA GOLDMAN, DIANA

1331 SE PORT ST. LUCIE BLVD 1858 SE PORT ST. LUCIE BLVD PORT ST. LUCIE, FL 34986

SUITE 102

PORT ST. LUCIE, FL 34952 US

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: 04/21/2009

> Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

() Delete (X) Change ( ) Addition

GOLDMAN, DIANA GOLDMAN, DIANA Name: Name:

1858 SE PORT ST LUCIE BLVD Address: 1331 SE PORT ST LUCIE BLVD, SUITE 102 Address:

City-St-Zip: PORT ST. LUCIE, FL 34986 City-St-Zip: PORT ST. LUCIE, FL 34952

Title: Title: (X) Change ( ) Addition ( ) Delete FERGUSON, JONATHAN

Name: WATERS, TYSON J Name: Address: 145 NW CENTRAL PARK PLAZA, SUITE #200 Address:

145 NW CENTRAL PARK PLAZA, SUITE #200 City-St-Zip:

PORT SAINT LUCIE, FL 34986 City-St-Zip: PORT SAINT LUCIE, FL 34986

Title: () Delete Title: (X) Change ( ) Addition WATERS, TYSON J Name: VILLAFRANCO, LEONARD S Name:

145 NW CENTRAL PARK PLAZA, SUITE #200 1430 SW ST. LUCIE BLVD, SUITE #103 Address: Address:

City-St-Zip: PORT SAINT LUCIE, FL 34986 City-St-Zip: PORT SAINT LUCIE, FL 34986

Title: ( ) Delete Title: (X) Change ( ) Addition HICKMAN, SANDRA R Name: NICHOLS, LOIS Name:

1860 SW PALM CITY ROAD, SUITE #202 500 S US HIGHWAY ONE, SUITE 1 Address: Address:

City-St-Zip: STUART, FL 34994 City-St-Zip: FORT PIERCE, FL 34948

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: DIANA GOLDMAN TD 04/21/2009