## 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N9700000004

FILED Jan 14, 2009 Secretary of State

Entity Name: MARTIN COUNTY GENEALOGICAL SOCIETY, INC.

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

**BLAKE LIBRARY** 2351 S.E. MONTEREY ROAD STUART, FL 34996

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

P.O. BOX 275

STUART, FL 34995 US

FEI Number: 31-1489319 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

BRUETSCH, WALTER CARVEL, KIMBERLY 6873 SE WARWICK LANE 8880 SOUTH OCEAN DRIVE STUART, FL 34997 APT 504 JENSEN BEACH, FL 34957 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: KIMBERLY CARVEL 01/14/2009

> Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

(X) Change ( ) Addition () Delete BRUETSCH, WALTER CARVEL, KIMBERLY Name: Name: Address: 6873 SE WARWICK LANE Address: 8880 SOUTH OCEAN DRIVE, APT 504

City-St-Zip: STUART, FL 34997 City-St-Zip: JENSEN BCH, FL 34957

Title: () Delete Title: (X) Change ( ) Addition

Name: EGGERT, JOANNE Name: MC DONNELL, SANDRA Address: 3991 SE FAIRWAY W Address: 175 S.E. SAINT LUCIE BLVD, A113

City-St-Zip: STUART, FL 34997 City-St-Zip: STUART, FL 34996

Title: VΡ () Delete Title: () Change () Addition

ELDRIDGE, DAVID Name: Name: 8172 SE VILLA WAY Address: Address: City-St-Zip: HOBE SOUND, FL 33455 City-St-Zip:

( ) Delete Title: Title: () Change () Addition

VOUGHT, E. LÉE Name: Name: 4842 SW ABERDEEN CIRCLE Address: Address: City-St-Zip: PALM CITY, FL 34990 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: SANDRA MC DONNELL Т 01/14/2009