2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N97000002694

FILED Feb 23, 2011 Secretary of State

Entity Name: LEGAL AID SOCIETY OF THE BAR ASSOCIATIONS OF ST. LUCIE COUNTY, INC.

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

1209 DELAWARE AVE FT PIERCE, FL 34950

Current Mailing Address: New Mailing Address:

1209 DELAWARE AVE FT PIERCE, FL 34950

FEI Number: 65-0793200 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:

GORMAN, ROBERT J 1209 DELAWARE AVE FT PIERCE, FL 34950

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:

US

Title: STD

Name: GORMAN, ROBERT J Address: 1209 DELAWARE AVE City-St-Zip: FT PIERCE, FL 34950

Title: D

 Name:
 SCHWERER, ROBERT V

 Address:
 PO BOX 3779 N/A

 City-St-Zip:
 FT PIERCE, FL 349483779

Title: D

Name: SHAFER, T. CHARLES Address: 207 ATLANTIC AVE City-St-Zip: FT PIERCE, FL 34950

Title: [

Name: PINKNEY, PADRICK A

Address: 145 NW CENTRAL PARK PLAZA

City-St-Zip: PT ST LUCIE, FL 34986

Title: PD

Name: MELVILLE, HAROLD G Address: 2940 S 25TH ST City-St-Zip: FT PIERCE, FL 34981

I hereby 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 all other like empowered.

SIGNATURE: ROBERT J. GORMAN STD 02/23/2011