

**2006 NOT-FOR-PROFIT CORPORATION REINSTATEMENT**

**FILED  
Apr 24, 2006  
Secretary of State**

DOCUMENT# N98000000011

**Entity Name:** BIG BROTHERS AND BIG SISTERS OF MARTIN COUNTY FOUNDATION, INC.

**Current Principal Place of Business:**

5033 SE FEDERAL HWY.  
STUART, FL 34997

**New Principal Place of Business:**

**Current Mailing Address:**

5033 SE FEDERAL HWY.  
STUART, FL 34997

**New Mailing Address:**

**FEI Number:** 65-0811722      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**  
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

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

BRODIE, LAWRENCE P  
525 SW CAMDEN AVENUE  
STUART, FL 34996 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: LAWRENCE P. BRODIE

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: PTD ( ) Delete  
Name: VEGA, RUTH ANN  
Address: 10770 S.E. FED'L HWY  
City-St-Zip: HOBE SOUND, FL 34957

Title: VD ( ) Delete  
Name: BEE, WILLIAM  
Address: 5033 FEDERAL HIGHWAY  
City-St-Zip: STUART, FL 34997

Title: VSD ( ) Delete  
Name: BRODIE, SALLY  
Address: 6721 SE HARBOR CIRCLE  
City-St-Zip: STUART, FL 34996

Title: D ( ) Delete  
Name: BRODIE, LAWRENCE  
Address: 6721 S.E. HARBOR CIRCLE  
City-St-Zip: STUART, FL 34996

**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: LAWRENCE P. BRODIE

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

D

04/24/2006

\_\_\_\_\_  
Date