

2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000064852

FILED
Jan 04, 2011
Secretary of State

Entity Name: SMF OF MARTIN COUNTY, INC.

Current Principal Place of Business:

2112 S US HIGHWAY 1
STE 201
FORT PIERCE, FL 34950 US

New Principal Place of Business:

Current Mailing Address:

2112 S US HIGHWAY 1
STE 201
FORT PIERCE, FL 34950 US

New Mailing Address:

FEI Number: 65-1031115

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FOGAL, CHRISTOPHER E
2112 S US HIGHWAY 1
STE 201
FORT PIERCE, FL 34950 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:

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PS
Name: MATAKAETIS, MICHAEL J
Address: 4900 NE SPINNAKER POINT PLACE
City-St-Zip: STUART, FL 34996

Title: VP
Name: LASKARIS, SPIRO
Address: 502 SE ASHLEY OAKS WAY
City-St-Zip: STUART, FL 34997

Title: T
Name: FOGAL, CHRISTOPHER E
Address: 102 NE CHARLESTON OAKS DRIVE
City-St-Zip: PORT SAINT LUCIE, FL 34983

Title: D
Name: MATAKAETIS, SHERRY
Address: 4900 NE SPINNAKER POINT PLACE
City-St-Zip: STUART, FL 34996

Title: D
Name: LASKARIS, JULIA
Address: 502 SW ASHLEY OAKS WAY
City-St-Zip: STUART, FL 34997

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 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: MICHAEL MATAKAETIS

PS

01/04/2011

Electronic Signature of Signing Officer or Director

Date