

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000062015

FILED  
Mar 27, 2008  
Secretary of State

Entity Name: THREE SISTERS OF THE TREASURE COAST, INC.

**Current Principal Place of Business:**

676 NE DIXIE HIGHWAY  
JENSEN BEACH, FL 34957

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 1664  
JENSEN BEACH, FL 34958

**New Mailing Address:**

FEI Number: 20-1013579      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired (X)

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

JOHNSTON, NANCY L  
1005 SUMNER AVENUE  
JENSEN BEACH, FL 34957      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

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: P ( ) Delete  
Name: JOHNSTON, NANCY L  
Address: 1005 SUMNER AVENUE  
City-St-Zip: JENSEN BEACH, FL 34957

Title: V ( ) Delete  
Name: JOHNSTON, LORETTA B  
Address: 509 S. CAROLINA DRIVE  
City-St-Zip: STUART, FL 34994

Title: V ( ) Delete  
Name: GROSE, ELVA J  
Address: 1393 NW COCONUT POINT LANE  
City-St-Zip: STUART, FL 34994

**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:

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

SIGNATURE: NANCY JOHNSTON

P

03/27/2008

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date