

2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 726788

Entity Name: HISTORICAL SOCIETY OF MARTIN COUNTY, INC.**Current Principal Place of Business:**825 NE OCEAN BLVD
STUART, FL 34996**Current Mailing Address:**825 NE OCEAN BLVD
STUART, FL 34996 US**FEI Number:** 59-0913326**Certificate of Status Desired:** Yes**Name and Address of Current Registered Agent:**EARLE, DAVID BESQ.
789 SOUTH FEDERAL HIGHWAY
SUITE 101
STUART, FL 34994 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:**_____
Electronic Signature of Registered Agent_____
Date**Officer/Director Detail :**

Title	SECRETARY
Name	YOUNGBLOOD, KEVIN
Address	428 SE KITCHING CIRCLE
City-State-Zip:	STUART FL 34994

Title	CHAIRMAN
Name	UPTON, PETER
Address	1924 NW SHORE TERRACE
City-State-Zip:	STUART FL 34994

Title	VC
Name	GIACHINO, FERNANDO
Address	17 MARTIN L KING JR BLVD SUITE 200 PO BOX 106
City-State-Zip:	STUART FL 34995-0106

Title	CEO
Name	ESLER, JENNIFER
Address	825 NE OCEAN BLVD
City-State-Zip:	STUART FL 34996

Title	TREASURER
Name	HICKS, CHARLES
Address	825 NE OCEAN BLVD
City-State-Zip:	STUART FL 34996

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: JENNIFER ESLER

CEO

02/26/2015

Electronic Signature of Signing Officer/Director Detail_____
Date