

# 2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 732095

1. Entity Name

THE HOBE SOUND NATURE CENTER, INC.

**FILED**  
May 19, 2002 8:00 am  
Secretary of State

05-19-2002 90054 003 \*\*\*\*61.25

Principal Place of Business

13640 SE FEDERAL HWY  
PO BOX 214  
HOBE SOUND FL 33475  
US

Mailing Address

1364 S FEDERAL HWY  
PO BOX 214  
HOBE SOUND FL 33475

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

59-1644398

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional  
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

JOHNSTON, MICKEY  
11850 SE OLD DIXIE HWY  
HOBE SOUND FL 33455

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW: FEE IS \$61.25

9. Election Campaign Financing  
Trust Fund Contribution. ☐

\$5.00 May Be  
Added to Fees

Make Check Payable to  
Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

T  
NAME SMITH, RICHARD E DR.  
STREET ADDRESS 11858 SE. DIXIE HWY  
CITY-ST-ZIP HOBE SOUND FL

☐ Delete

President  
McIver, Rosie  
106 21 Jupiter Narrows Dr.  
Hobe Sound, FL 33455

☐ Change ☒ Addition

D  
NAME NUTTLE, MRS. PHILLIP  
STREET ADDRESS SOUTH BEACH RD  
CITY-ST-ZIP HOBE SOUND FL

☐ Delete

Secretary  
Connolly, Mrs. Ann  
306 S. Beach Road  
Hobe Sound, FL 33455

☐ Change ☒ Addition

D  
NAME BURKE, MRS JACKSON  
STREET ADDRESS 411 S BEACH RD  
CITY-ST-ZIP HOBE SOUND FL

☐ Delete

☐ Change ☐ Addition

D  
NAME JOHNSTON, BETSY  
STREET ADDRESS 133 GOMEZ ROAD  
CITY-ST-ZIP HOBE SOUND FL 33455

☐ Delete

☐ Change ☐ Addition

V  
NAME JOHNSTON, J MICKEY  
STREET ADDRESS 11850 SE OLD DIXIE HWY  
CITY-ST-ZIP HOBE SOUND FL

☐ Delete

☐ Change ☐ Addition

D  
NAME ANNIBALI, MALI  
STREET ADDRESS 112 N BEACH RD  
CITY-ST-ZIP HOBE SOUND FL

☐ Delete

☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

*Mickey Johnston*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-25-02

(772) 546-8067

Date

Daytime Phone #

CR2E037 (9/01)