

FILE NOW: FILING FEE IS \$61.25

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Feb 11 1998 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # 757743 (0)
1. Corporation Name
HOBE VILLAGE MOBILE HOME OWNERS ASSOC., INC.



Principal Place of Business CLUB HOUSE 11411 SE FEDERAL HWY. HOBE SOUND FL 33455 US	Mailing Address P.O. BOX 8101 HOBE SOUND FL 33455
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3. Date Incorporated or Qualified 04/27/1981	
4. FEI Number 59-2074759	☒ Applied For ☐ Not Applicable
5. Certificate of Status Desired ☒	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐	\$5.00 May Be Added to Fees
7. Is this nonprofit corporation a homeowners association? ☒ Yes ☐ No	
8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. ☐ Yes ☐ No	

2. Principal Place of Business		2a. Mailing Address	
21 Suite, Apt. #, etc.	26 Suite, Apt. #, etc.	27 City & State	28 City & State
23 Zip	25 Country	29 Zip	30 Country

9. Name and Address of Current Registered Agent ROBINSON, P.H. 11411 S.E. FEDERAL HWY #6 HOBE SOUND FL 33455		10. Name and Address of New Registered Agent	
81 Name	82 Street Address (P.O. Box Number is Not Acceptable)	83	84 City
		85 Zip Code	FL

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	DT ☐ DELETE	1.1 TITLE	P ☐ Change ☐ Addition
NAME	ROBINSON, PAUL H.	1.2 NAME	Manuel, Tore
STREET ADDRESS	11411 SE FEDERAL HWY #6	1.3 STREET ADDRESS	11411 S.E. Fed. Hwy. # 101
CITY-ST-ZIP	HOBE SOUND FL	1.4 CITY-ST-ZIP	Hobe Sound, Fl. 33455
TITLE	D ☒ DELETE	2.1 TITLE	VD ☐ Change ☐ Addition
NAME	JENKINS, KENNETH	2.2 NAME	Kelly, Charles
STREET ADDRESS	11411 SE FEDERAL HWY., # 118	2.3 STREET ADDRESS	11411 S.E. Fed. Hwy. # 5
CITY-ST-ZIP	HOBE SOUND FL	2.4 CITY-ST-ZIP	Hobe Sound, Fl.
TITLE	D ☐ DELETE	3.1 TITLE	D ☐ Change ☐ Addition
NAME	BAYLESS, ANDREA	3.2 NAME	Colvin, Albert
STREET ADDRESS	11411 SE FEDERAL HWY., # 23	3.3 STREET ADDRESS	11411 S.E. Fed. Hwy.
CITY-ST-ZIP	HOBE SOUND FL	3.4 CITY-ST-ZIP	Hobe Sound, Fl.
TITLE	D ☒ DELETE	4.1 TITLE	D ☐ Change ☐ Addition
NAME	ATER, ROBERT	4.2 NAME	Wilson, Lila
STREET ADDRESS	11411 SE FEDERAL HWY	4.3 STREET ADDRESS	11411 S.E. Fed. Hwy. # 102
CITY-ST-ZIP	HOBE SOUND FL	4.4 CITY-ST-ZIP	Hobe Sound, Fl.
TITLE	VD ☐ DELETE	5.1 TITLE	D ☐ Change ☐ Addition
NAME	KELLEY, CHARLES	5.2 NAME	Reynolds, Alice
STREET ADDRESS	11411 SE FEDERAL HWY., # 5	5.3 STREET ADDRESS	11411 S.E. Fed. Hwy. # 68
CITY-ST-ZIP	HOBE SOUND FL	5.4 CITY-ST-ZIP	Hobe Sound, FL 33455
TITLE	D ☒ DELETE	6.1 TITLE	-02/11/98--01088--028
NAME	KELLEY, CONNIE	6.2 NAME	***61.25
STREET ADDRESS	11411 SE FEDERAL HWY	6.3 STREET ADDRESS	900002428149
CITY-ST-ZIP	HOBE SOUND FL	6.4 CITY-ST-ZIP	02/11/98--01088--028

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(b), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: *Manuel* **14 Manuel 1998** **545-7324**

CR2E037 (10/97)