

FILE NOW: FILING FEE AFTER MAY 1 IS \$155.00

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra B. Northam
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # N11849 (9)

1. Corporation Name

HOBE SOUND FINE ARTS LEAGUE, INC.

95 FEB 15 AM 8:47
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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-02/16/95--01092--011
*****61.25 *****61.25

DO NOT WRITE IN THIS SPACE

Principal Place of Business 8937 S.E. BRIDGE RD. HOBE SOUND FL 33455	Mailing Address P.O. BOX 993 HOBE SOUND FL 33475 US
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3. Date Incorporated or Qualified 11/01/1985	3a. Date of Last Report 02/28/1994
4. FEI Number 59-2391631	Applied For Not Applicable

2. Principal Place of Business 21 8937 S.E. Bridge Rd. Suite, Apt. #, etc.	2a. Mailing Address 26 PO Box 993 Suite, Apt. #, etc.
City & State 23 Hobe Sound, Fl	City & State 27 Hobe Sound, Fl.
Zip 24 33455	Country 25 USA
Zip 29 33475	Country 30 USA

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. Nonprofit with IRS 501(c)(3) Tax Exempt Status ☒	\$68.75 Supplemental Fee Not Required
8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☐ Yes ☒ No	

9. Name and Address of Current Registered Agent RUDOLPH, REGINA 8163 SE CROFT CIRCLE HOBE SOUND FL 33455	
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10. Name and Address of New Registered Agent	
81 Name CYNTHIA WILSON	
82 Street Address (P.O. Box Number is Not Acceptable) 7829 S.E. Cactus Ave.	
83	
84 City Hobe Sound,	FL 85 Zip Code 33455

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, 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 607.0502, Florida Statutes.

SIGNATURE *Cynthia Wilson* DATE 1/17/95
(NOTE: Registered Agent signature required when registering)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE PD	RUDOLPH, REGINA W 8163 SE CROFT CIRCLE HOBE SOUND FL	1.1 TITLE P/D	☒ Change ☐ Addition
NAME		1.2 NAME Cynthia Wilson	
STREET ADDRESS		1.3 STREET ADDRESS 7829 S.E. Cactus Ave.	
CITY-ST-ZIP		1.4 CITY-ST-ZIP Hobe Sound, Fl. 33455	☐ Change ☐ Addition
TITLE VD	CARTON, MARION 8706 SE BAHAMA CIRCLE HOBE SOUND FL 33455	2.1 TITLE V/D	☐ Change ☐ Addition
NAME		2.2 NAME Ann Modugno	
STREET ADDRESS		2.3 STREET ADDRESS 12690 SE Berwick Ct.	
CITY-ST-ZIP		2.4 CITY-ST-ZIP Hobe Sound, Fl. 33455	☐ Change ☐ Addition
TITLE TD	BECKER, ELEANOR 7322 SE CONCORD PLACE HOBE SOUND FL 33455	3.1 TITLE	☐ Change ☐ Addition
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY-ST-ZIP		3.4 CITY-ST-ZIP	☐ Change ☐ Addition
TITLE SD	FRANKLIN, LOUISE 13185 SE CYPRESS POINT LANE HOBE SOUND FL 33455	4.1 TITLE	☐ Change ☐ Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	☐ Change ☐ Addition
TITLE		5.1 TITLE	☐ Change ☐ Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	☐ Change ☐ Addition
TITLE		6.1 TITLE	☐ Change ☐ Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	☐ Change ☐ Addition

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and 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: *Cynthia Wilson* DATE 1/17/95 546-2126
DO NOT SIGN AND TYPE ON PRINTED NAME OF SIGNER OF FILER OR DIRECTOR