

FILE NOW: FILING FEE IS \$61.25

NONPROFIT  
CORPORATION  
ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State

DIVISION OF CORPORATIONS

DOCUMENT # N31356

(1)

1. Corporation Name

HOBE SOUND LITTLE LEAGUE, INC.



Principal Place of Business

Mailing Address

9618 SE CREST CT  
HOBE SOUND FL 33455  
US

P O BOX 1892  
HOBE SOUND FL 33455  
US

2. Principal Place of Business

2a. Mailing Address

21 8611 SE Duncan St.

26 Suite, Apt. #, etc.

22 Suite, Apt. #, etc.

27 Suite, Apt. #, etc.

23 City & State  
Hobe Sound, FL

28 City & State

24 Zip  
33455

25 Country  
USA

29 Zip

Country

30

3. Date Incorporated or Qualified

03/24/1989

4. FEI Number

42-8805121 65-0657125

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional  
Fee Required

6. Election Campaign Financing

☐

\$5.00 May Be

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

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

OSTERHOUDT, ROBERT JR.  
9618 SE CREST  
HOBE SOUND FL 33455

81 Name

Andrew Sherman

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

8611 SE Duncan St.

83

84 City

Hobe Sound

FL

85 Zip Code

33455

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 Andrew Sherman

President (Andrew J Sherman) 4-27-98

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 PD ☒ DELETE

NAME OSTERHOUDT, ROBERT  
STREET ADDRESS 9618 SE CREST  
CITY-ST-ZIP HOBE SOUND FL 33455

1.1 TITLE

PD Andrew Sherman  
8611 SE Duncan St.  
Hobe Sound, FL 33455

☐ Change

☒ Addition

TITLE VD ☒ DELETE

NAME CANTRELL, BOB  
STREET ADDRESS 13678 FLORA AVE  
CITY-ST-ZIP HOBE SOUND FL

2.1 TITLE

VD Kenneth Desch  
8394 SE Quail Ridge Way  
Hobe Sound, FL 33455

☐ Change

☒ Addition

TITLE S ☒ DELETE

NAME STUTEVOSS, JULIE  
STREET ADDRESS 8788 SE SANDRIDGE AVE  
CITY-ST-ZIP HOBE SOUND FL

3.1 TITLE

SD Heather Peterson  
9164 SE Morning St.  
Hobe Sound, FL 33455

☐ Change

☒ Addition

TITLE T ☒ DELETE

NAME OSTERHOUDT, LERA  
STREET ADDRESS 9618 S.E. CREST  
CITY-ST-ZIP HOBE SOUND FL

4.1 TITLE

TD Walter Austin  
9505 SE Sunrise Way  
Hobe Sound, FL 33455

☐ Change

☒ Addition

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

☐ Change

☐ Addition

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

☐ Change

☐ Addition

14. 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 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:

Walter Austin 4-27-98 (SD) 546-0300

CP2E037 (10/97)