2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 30, 2008 08:00 AM
Secretary of State

DOCUMENT # P95000097924

1. Entity Name
HOBE SOUND RANCH, INC.

Principal Place of Business	Mailing Address
4500 PGA BLVD. STE 207 PALM BEACH GARDENS, FL 33418	4500 PGA BLVD. STE 207 PALM BEACH GARDENS, FL 33418

DO NOT WRITE IN THIS SPACE

02222008 No Chg-P CR2E034 (11/05)

4. FEI Number
65-0634095
☐ Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

BRANDT, PHILLIP L
4500 PGA BLVD., SUITE 207
PALM BEACH GARDENS, FL 33418

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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. I am familiar with, and accept the obligations of registered agent.

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

FILE NOW!!! FEE IS $150.00
After May 1, 2008 Fee will be $550.00

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

U00000935166
05/23/08 00059-017 150.00

10. OFFICERS AND DIRECTORS

TITLE	DP
NAME	GALUI, JUDITH M
STREET ADDRESS	4500 PGA BLVD., SUTIE 207
CITY-ST-ZIP	PALM BEACH GARDENS, FL 33418
TITLE	DSTV
NAME	STEPHANOS, DIANE L.
STREET ADDRESS	4500 PGA BLVD., SUITE 207
CITY-ST-ZIP	PALM BEACH GARDENS, FL 33418
TITLE	DV
NAME	DIVOSTA, CATHY
STREET ADDRESS	4500 PGA BLVD., SUITE 207
CITY-ST-ZIP	PALM BEACH GARDENS, FL 33418
TITLE	DV
NAME	DIVOSTA, GUY M
STREET ADDRESS	4500 PGA BLVD, STE. 207
CITY-ST-ZIP	PALM BEACH GARDENS, FL 33418
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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 607, 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: _____ Judith M. Galui 3/18/08 561/691-9050
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #