

2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 709534

Entity Name: HOBE SOUND CHILD CARE CENTER, INC.

Current Principal Place of Business:

11580 S.E. GOMEZ AVE.
HOBE SOUND, FL 33455

Current Mailing Address:

11580 S.E. GOMEZ AVE.
HOBE SOUND, FL 33455

FEI Number: 59-1107869

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

KING, MARY T
8536 MAY TERRACE
HOBE SOUND, FL 33455 US

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: _____

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title M
Name KING, MARY TMRS.
Address 8536 MAY TERRACE
City-State-Zip: HOBE SOUND FL 33455

Title PRESIDENT
Name MAZZOTA, JASON MR.
Address 4359 SE SWEETWOOD WAY
City-State-Zip: STUART FL 34997

Title VP
Name KLOSKA, ROB MR.
Address 8512 SE QUAIL RIDGE WAY
City-State-Zip: HOBE SOUND FL 33455

Title TREASURER
Name MEHLING, ANN MS.
Address 3001 NE HEATHER COURT
City-State-Zip: JENSEN BEACH FL 34957

Title SECRETARY
Name SMITH, ERIN MRS.
Address 8394 SE LAGOON DRIVE
City-State-Zip: HOBE SOUND FL 33455

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.

SIGNATURE: MARY T KING

EXECUTIVE DIRECTOR

04/15/2016

Electronic Signature of Signing Officer/Director Detail

Date