

2022 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 732095

Entity Name: THE HOBE SOUND NATURE CENTER, INC.**Current Principal Place of Business:**13640 SE FEDERAL HWY
HOBE SOUND, FL 33455**Current Mailing Address:**P.O. BOX 214
HOBE SOUND, FL 33475**FEI Number: 59-1644398****Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**VOGEL, MABEL
6978 SE GOLFHOUSE DRIVE
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 VP
Name GRISWOLD, NINA
Address 128 SOUTH BEACH ROAD
City-State-Zip: HOBE SOUND FL 33455

Title DIRECTOR
Name VOGEL, MABEL
Address 6978 SE GOLFHOUSE DRIVE
City-State-Zip: HOBE SOUND FL 33455

Title DIRECTOR
Name CALDER, ANN
Address 220 SOUTH BEACH ROAD
City-State-Zip: HOBE SOUND FL 33455

Title DIRECTOR
Name DOERGE, CARL
Address 7081 SE GOLFHOUSE DRIVE
City-State-Zip: HOBE SOUND FL 33455

Title DIRECTOR
Name TIMBERS, ELAINE MRS.
Address 182 S. BEACH ROAD
City-State-Zip: HOBE SOUND FL 33455

Title DIRECTOR
Name REED, MICHELLE
Address 5200 SE 138 STREET
City-State-Zip: HOBE SOUND FL 33455

Title DIRECTOR
Name ROOSEVELT, SALLY
Address 10343 SE MARIGOLD CIRCLE
City-State-Zip: HOBE SOUND FL 33455

Title DIRECTOR
Name HERLIN, LESLIE
Address 8520 SE SABAL STREET
City-State-Zip: HOBE SOUND FL 33455

Continues on page 2

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: MABEL VOGEL**DIRECTOR****01/27/2022**

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title PRESIDENT
Name ALLEN, NATHAN
Address 14 GOMEZ ROAD
City-State-Zip: HOBE SOUND FL 33455

Title VP
Name HEMMES, SUSAN A.
Address 8365 SE WOODCREST PLACE
City-State-Zip: HOBE SOUND FL 33455

Title TREASURER
Name CAFFREY, ANDREW
Address 9742 SE HIGHBOURNE WAY
City-State-Zip: HOBE SOUND FL 33455

Title DIRECTOR
Name PRATT, SANDRA
Address 7910 SE LOBLOLLY BAY DRIVE
City-State-Zip: HOBE SOUND FL 33455

Title DIRECTOR
Name GILMARTIN, GLADIE
Address 7739 SE LOBLOLLY BAY DRIVE
City-State-Zip: HOBE SOUND FL 33455

Title DIRECTOR
Name ANDREWS, BUCK
Address 185 GOMEZ ROAD
City-State-Zip: HOBE SOUND FL 33455

Title SECRETARY
Name MCDONALD, CYNDI
Address 18252 SE HERITAGE DRIVE
City-State-Zip: TEQUESTA FL 33469