## 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.

TREASURER

SIGNATURE: STEPHANIE EAKINS

Electronic Signature of Signing Officer/Director Detail

Entity Name: SOUTH FLORIDA HOBY, INC. **Current Principal Place of Business:** 

7683 SANTEE TERRACE LAKE WORTH. FL 33467

#### **Current Mailing Address:**

7683 SANTEE TERRACE LAKE WORTH. FL 33467 US

#### FEI Number: 20-3941627

#### Name and Address of Current Registered Agent:

STEPHANIE, EAKINS 7683 SANTEE TERRACE LAKE WORTH, FL 33467 US

2013 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

# Certificate of Status Desired: No

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	P	Title	т	
Name	JACKSON, STEPHANIE A	Name	EAKINS, STEPHANIE	
Address	11189 SOUTH TERRADAS LANE	Address	7683 SANTEE TERRACE	
City-State-Zip:	BOCA RATON FL 33428	City-State-Zip:	LAKE WORTH FL 33467	

## FILED Feb 21, 2013 Secretary of State CC8158618094

Date

02/21/2013