

2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N14501

FILED
Jan 24, 2014
Secretary of State
CC8242516209

Entity Name: HOBE SOUND NATURE CENTER FOUNDATION, INC.

Current Principal Place of Business:

13640 SE FEDERAL HIGHWAY
HOBE SOUND, FL 33455

Current Mailing Address:

PO BOX 214
HOBE SOUND, FL 33475 US

FEI Number: 65-0050653

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 D
Name GARRETT, MARY
Address 202 S BCH RD
City-State-Zip: HOBE SOUND FL 33455

Title D
Name GARRETT, ROBERT
Address 202 SOUTH BEACH ROAD
City-State-Zip: HOBE SOUND FL 33455

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

Title D
Name GRISWOLD, NINA
Address 128 S. BCH ROAD
City-State-Zip: HOBE SOUND FL 33455

Title D
Name JOHNSTON, BETSY
Address 133 GOMEZ RD
City-State-Zip: HOBE SOUND FL 33455

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

Title DIRECTOR
Name TIMBERS, ELAINE
Address 182 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

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

01/24/2014

Electronic Signature of Signing Officer/Director Detail

Date