## 2013 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N14501

Entity Name: HOBE SOUND NATURE CENTER FOUNDATION, INC.

FILED
Jan 22, 2013
Secretary of State
CC7967298330

## **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 Title D

Name GARRETT, MARY Name GARRETT, ROBERT

Address 202 S BCH RD Address 202 SOUTH BEACH ROAD

City-State-Zip: HOBE SOUND FL 33455 City-State-Zip: HOBE SOUND FL 33455

Title D Title D

NameVOGEL, MABELNameGRISWOLD, NINAAddress6978 SE GOLFHOUSE DRIVEAddress128 S. BCH ROAD

City-State-Zip: HOBE SOUND FL 33455 City-State-Zip: HOBE SOUND FL 33455

Title D Title I

Name JOHNSTON, BETSY Name VOGEL, RALPH

Address 133 GOMEZ RD Address 6978 SE GOLFHOUSE DRIVE

City-State-Zip: HOBE SOUND FL 33455 City-State-Zip: HOBE SOUND FL 33455

Title DIRECTOR

Name TIMBERS, ELAINE

Address 182 SOUTH BEACH ROAD
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 01/22/2013