SIGNATURE	: KATHRYN GARBOWSKI			01/23/2015
	Electronic Signature of Registered Agent			Date
Officer/Direc	ctor Detail :			
Title	PRESIDENT	Title	PAST PRESIDENT	
Name	HOLCZER, LOIS	Name	HENSLEY, KATHRYN	
Address	891 NW RED PINE ROAD	Address	4204 OKEECHOBEE ROAD	
City-State-Zip:	JENSEN BEACH FL 34957	City-State-Zip:	FORT PIERCE FL 34947	
Title	TREASURER	Title	SECRETARY	
Name	PRICE, CLAY	Name	SHARPE, GEORGE	
Address	5070 NORTH A1A, SUITE 250	Address	4655 PEBBLE BAY SOUTH	
City-State-Zip:	VERO BEACH FL 32963	City-State-Zip:	VERO BEACH FL 32963	
Title	CEO	Title	DIRECTOR	
Name	WANINGER, MICHAEL J	Name	BASS, LAURA	
Address	2400 NE DIXIE HWY	Address	1281 INDIAN MOUND TRAIL	
City-State-Zip:	JENSEN BEACH FL 34957	City-State-Zip:	VERO BEACH FL 32963	
Title	DIRECTOR	Title	DIRECTOR	
Name	BRADEN, DAN	Name	DAMSON, BARRIE	
Address	835 NE BAYBERRY LN	Address	6853 SE ISLE WAY	
City-State-Zip:	JENSEN BEACH FL 34957	City-State-Zip:	STUART FL 34996	

2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N9300002328

Entity Name: HIBISCUS CHILDREN'S CENTER FOUNDATION, INC.

Current Principal Place of Business:

2400 NE OLD DIXIE HWY JENSEN BEACH, FL 34957

Current Mailing Address:

2400 NE OLD DIXIE HWY JENSEN BEACH, FL 34957

FEI Number: 65-0411920

Name and Address of Current Registered Agent:

GARBOWSKI, KATHRYN M 2400 NE OLD DIXIE HWY JENSEN BEACH, FL 34957 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.

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: MICHAEL WANINGER

CEO

01/23/2015 Date

Electronic Signature of Signing Officer/Director Detail

FILED Jan 23, 2015 Secretary of State CC2546423796

Certificate of Status Desired: No

Officer/Director Detail Continued :

Title	DIRECTOR	Title	DIRECTOR
Name	GRANDE, CHARLES	Name	TINA , HART
Address	9950 S OCEAN DR	Address	1374 NE SKYLINE DR
City-State-Zip:	JENSEN BEACH FL 34957	City-State-Zip:	JENSEN BEACH FL 34957
Title	PRESIDENT - ELECT		
Name	LOWE, ROBERT		

NameLOWE, ROBERTAddress4949 N A1A #131

City-State-Zip: FT. PIERCE FL 34949