

2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 709534

FILED
Apr 12, 2012
Secretary of State

Entity Name: HOBE SOUND CHILD CARE CENTER, INC.

Current Principal Place of Business:

11580 S.E. GOMEZ AVE.
HOBE SOUND, FL 33455

New Principal Place of Business:

Current Mailing Address:

11580 S.E. GOMEZ AVE.
HOBE SOUND, FL 33455

New Mailing Address:

FEI Number: 59-1107869

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KING, MARY T
8536 MAY TERRACE
HOBE SOUND, FL 33455 US

Name and Address of New Registered Agent:

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

OFFICERS AND DIRECTORS:

Title: PD
Name: RAINEY, SUSAN MS.
Address: 7731 SE SPICEWOOD CIR.
City-St-Zip: HOBE SOUND, FL 33455

Title: M
Name: KING, MARY T MRS.
Address: 8536 MAY TERRACE
City-St-Zip: HOBE SOUND, FL 33455

Title: VP
Name: MAZZOTA, JASON MR.
Address: 1800 SW HACKMAN TERRACE
City-St-Zip: STUART, FL 34997

Title: TR
Name: KLOSKA, ROB MR.
Address: 8512 SE QUAIL RIDGE WAY
City-St-Zip: HOBE SOUND, FL 33455

Title: S
Name: PHILLIPS, PATTY MS.
Address: 8286 SE PINEHAVEN AVE.
City-St-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: MARY T KING

M

04/12/2012

Electronic Signature of Signing Officer or Director

Date