


FILE NOW: FILING FEE IS \$61.25

FILED  
May 14 1997 8:00am  
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT <b>1997</b>		FLORIDA DEPARTMENT OF STATE <b>Sandra B. Mortham</b> Secretary of State DIVISION OF CORPORATIONS
--	---	---

**DOCUMENT # 732095 (5)**  
1. Corporation Name  
**THE HOBE SOUND NATURE CENTER, INC.**



Principal Place of Business <b>13640 SE FEDERAL HWY PO BOX 214 HOBE SOUND FL 33475 US</b>	Mailing Address <b>1364 S FEDERAL HWY PO BOX 214 HOBE SOUND FL 33475-0214</b>
--	--

<b>21</b> 2. Principal Place of Business	<b>26</b> 2a. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
<b>22</b> City & State	<b>27</b> City & State
<b>23</b> Zip	<b>28</b> Zip
<b>24</b> Country	<b>29</b> Country
<b>25</b>	<b>30</b>

<b>3.</b> Date Incorporated or Qualified <b>03/10/1975</b>	<b>3a.</b> Date of Last Report <b>04/26/1996</b>
<b>4.</b> FEI Number <b>59-1644398</b>	Applied For Not Applicable
<b>5.</b> Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75</b> Additional Fee Required
<b>6.</b> Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	<b>\$5.00</b> May Be Added to Fees
<b>8.</b> This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input type="checkbox"/> No	

**9. Name and Address of Current Registered Agent**

**JOHNSTON, MICKEY  
11850 SE OLD DIXIE HWY  
HOBE SOUND FL 33455**

**10. Name and Address of New Registered Agent**

**81** Name  
**82** Street Address (P.O. Box Number is Not Acceptable)  
**83**  
**84** City  
**FL** **85** Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

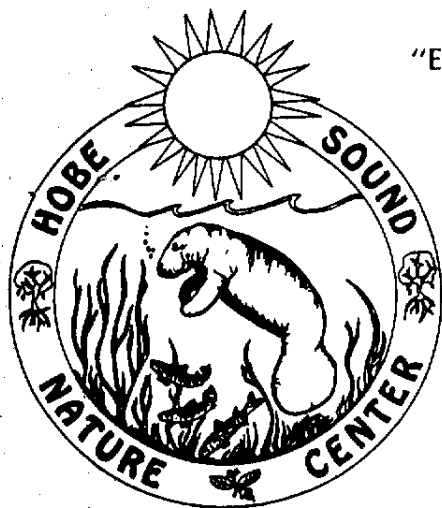
SIGNATURE \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PD <input type="checkbox"/> DELETE	1.1 TITLE	D <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	KIRBY, ELIZABETH W.	1.2 NAME	Blake, Mrs. Curtis L.
STREET ADDRESS	SOUTH BEACH RD	1.3 STREET ADDRESS	85 South Beach Road
CITY-ST-ZIP	HOBE SOUND FL	1.4 CITY-ST-ZIP	Hobe Sound, FL 33455
TITLE	D <input type="checkbox"/> DELETE	2.1 TITLE	D <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	NUTTLE, MRS. PHILLIP	2.2 NAME	Boothby, Mr. Willard
STREET ADDRESS	SOUTH BEACH RD	2.3 STREET ADDRESS	107 Bassett Creek Trail
CITY-ST-ZIP	HOBE SOUND FL	2.4 CITY-ST-ZIP	Hobe Sound, FL 33455
TITLE	D <input type="checkbox"/> DELETE	3.1 TITLE	D <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	BURKE, MRS JACKSON	3.2 NAME	Connolly, Mrs. Joseph
STREET ADDRESS	411 S BEACH RD	3.3 STREET ADDRESS	103 Harbor Way
CITY-ST-ZIP	HOBE SOUND FL	3.4 CITY-ST-ZIP	Hobe Sound, FL 33455
TITLE	D <input type="checkbox"/> DELETE	4.1 TITLE	D <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	STANLEY, THOMAS B. JR	4.2 NAME	Griswold, Nina
STREET ADDRESS	SOUTH BEACH RD	4.3 STREET ADDRESS	128 North Beach Road
CITY-ST-ZIP	HOBE SOUND FL	4.4 CITY-ST-ZIP	Hobe Sound, FL 33455
TITLE	D <input type="checkbox"/> DELETE	5.1 TITLE	D <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	JOHNSTON, J MICKEY	5.2 NAME	Hotchkiss, Mrs. W.F.
STREET ADDRESS	11850 SE OLD DIXIE HWY	5.3 STREET ADDRESS	154 South Beach Road
CITY-ST-ZIP	HOBE SOUND FL	5.4 CITY-ST-ZIP	Hobe Sound, FL 33455
TITLE	D <input type="checkbox"/> DELETE	6.1 TITLE	D <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Annibali, Mali	6.2 NAME	Hussey, Mrs. Nancy
STREET ADDRESS	112 N. Beach Road	6.3 STREET ADDRESS	3697 Cape Point Circle
CITY-ST-ZIP	Hobe Sound, FL 33455	6.4 CITY-ST-ZIP	Jupiter, FL 33477

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: *Mickey Johnston* Mickey Johnston 4-30-97 (56) 541-2067

CR2E037 (9/96)



"Every part of nature teaches."  
Henry David Thoreau

**HSNC Board of Directors, continued  
Additions**

**Johnston, Mrs. H.R.**  
133 Gomez Road  
Hobe Sound, FL 33455

**Madeira, Mrs. Joan Hay**  
178 Riverview Road  
Hobe Sound, FL 33455

**McIver, Mrs. Cecil**  
10621 Jupiter Narrows Drive  
Hobe Sound, FL 33455

**Merritt, Mr. Donald**  
11555 SE Gomez Avenue  
Hobe Sound, FL 33455

**Murray, Mrs. Mary**  
202 South Beach Road  
Hobe Sound, FL 33455

**Smith, Dr. Richard E.**  
11858 SE Dixie Hwy  
Hobe Sound, FL 33455

**Walker, Mrs. James H.**  
202 Grenville Road  
Hobe Sound, FL 33455

**Witsell, Mrs. Frederick**  
7029 SE Golfhouse Drive  
Hobe Sound, FL 33455