## 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## **DOCUMENT#740290**

FILED Apr 19, 2009 Secretary of State

Entity Name: THE HARBOUR AT HOBE SOUND HOME OWNERS ASSOCIATION, INC.

Current P	rincipal Place	e of Business:	New Principal Place	New Principal Place of Business:	
	ACHT CLUB ( JND, FL 3345				
Current Mailing Address:			New Mailing Addres	New Mailing Address:	
759 S FED STE 212 STUART, I	ERAL HWY FL 34994 (	Js			
FEI Number:	59-1909536	FEI Number Applied For ( )	FEI Number Not Applicable ( )	Certificate of Status Desired ( )	
Name and	Address of C	Current Registered Agent:	Name and Address	of New Registered Agent:	
ROSS, EA 759 S FED STUART, I	BORAH L ESORLE & BONAN ERAL HWY FL 34994 US	N PA	purpose of changing its registere	ed office or registered agent, or both,	
	of Florida.	Submits this statement for the	parpose of onlying its registere	a office of registered agent, or both,	
SIGNATUF					
		nic Signature of Registered Ag		Date	
OFFICERS AND DIRECTORS:			ADDITIONS/CHANG	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	PRES ( KONIGSEDER, 10808 SE GAL HOBE SOUND,	LEY COURT	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	TD ( GREEN, FRED 10805 SE DEC HOBE SOUND,	CK COURT	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	VP ( ANDERSEN, AI 9170 SE YACH HOBE SOUND,	IT CLUB CIR	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	S ( NASH, RICHAR 10708 SE FLO HOBE SOUND,	TILLA COURT	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	EVERT, DON	) Delete NACLE COURT , FL 33455	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	D ( HAWORTH, RC 10726 SE DOC HOBE SOUND,	CK COURT	Title: Name: Address: City-St-Zip:	() Change () Addition	

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: ALICE COPELAND ADMI 04/19/2009