

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 25, 2008 8:00 am
Secretary of State

04-25-2008 90145 026 ****61.25

DOCUMENT # 756007 1. Entity Name HOBE SOUND CHAMBER OF COMMERCE, INC.			
Principal Place of Business 8994 S.E. BRIDGE ROAD HOBE SOUND, FL 33455		Mailing Address P O BOX 1507 HOBE SOUND, FL 33475 US	
2. Principal Place of Business - No P.O. Box # 11954 SE DIXIE HWY Suite, Apt. #, etc.		3. Mailing Address Suite, Apt. #, etc.	
City & State HOBE SOUND FL		City & State	
Zip 33455	Country	Zip	Country
4. FEI Number 59-2073507		Applied For ☐ Not Applicable	
5. Certificate of Status Desired ☐		\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent COX, JACK 11450 SE DIXIE HIGHWAY, SUITE 104 HOBE SOUND, FL 33455		7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code	
8. 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. I am familiar with, and accept the obligations of registered agent.			
SIGNATURE _____ Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE			
Filing Fee is \$61.25 Due by May 1, 2008		9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees	
Make check payable to Florida Department of State			
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P ANDERSEN, ANDY 2301 SE MONTEREY ROAD STUART, FL 34996 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	PAST PRESIDENT ☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	EXD FERRARI, JENNIFER 8994 SE BRIDGE ROAD HOBE SOUND, FL 33455 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☒ Change ☐ Addition 10421 SE JUPITER NARROWS DR HOBE SOUND, FL 33455
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T LOPOPOLO, MARY 11711 SE FEDERAL HWY HOBE SOUND, FL 33455 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD KARRH, JIM 1620 N. US HIGHWAY 1 JUPITER, FL 33469 ☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V CAPPS, BLAKE 8686 ALABAMA PLACE HOBE SOUND, FL 33455 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	PRESIDENT ☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.			
SIGNATURE: <i>Jennifer Ferrari</i>		4/22/08 ⁷⁷²⁻⁵⁴⁶⁻ 7508	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		Date Daytime Phone #	