

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # H08316

1. Entity Name  
HOBE GROVES, INC.



Principal Place of Business  
2627 S JENKINS ROAD  
FORT PIERCE, FL 34981 US

Mailing Address  
2627 S JENKINS ROAD  
FORT PIERCE, FL 34981 US

2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

01152007

Chg-P

CR2E034 (12/06)

4. FEI Number

59-2430635

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional  
Fee Required

## 6. Name and Address of Current Registered Agent

HURLEY, THOMAS  
2627 S JENKINS ROAD  
FORT PIERCE, FL 34981

## 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

*Thomas Hurley*

CEO

4/17/07

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00  
After May 1, 2007 Fee will be \$550.00**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00** May Be  
Added to Fees

## 10. OFFICERS AND DIRECTORS

TITLE PD ☐ Delete  
NAME CUSSON, JEFFREY L  
STREET ADDRESS 736 36TH AVENUE  
CITY-ST-ZIP VERO BEACH, FL 32968

TITLE CD ☐ Delete  
NAME HURLEY, THOMAS  
STREET ADDRESS 2627 S JENKINS ROAD  
CITY-ST-ZIP FORT PIERCE, FL 34981

TITLE SD ☐ Delete  
NAME HURLEY, SCOTT R  
STREET ADDRESS 2627 S JENKINS ROAD  
CITY-ST-ZIP FORT PIERCE, FL 34981

TITLE TD ☐ Delete  
NAME HURLEY, RICHARD E  
STREET ADDRESS 2627 S JENKINS ROAD  
CITY-ST-ZIP FORT PIERCE, FL 34981

TITLE D ☒ Delete  
NAME HURLEY, BARBARA  
STREET ADDRESS 501 N. SWIM CLUB DRIVE, PH-A  
CITY-ST-ZIP VERO BCH, FL 32963

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

## 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME 400099086474  
STREET ADDRESS 04/27/07--01012--006  
CITY-ST-ZIP \*\*150.00

TITLE SD ☒ Change ☐ Addition  
NAME HURLEY, R. SCOTT  
STREET ADDRESS 2627 S. JENKINS ROAD  
CITY-ST-ZIP FORT PIERCE, FL 34981

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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 607, 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:

*Thomas Hurley*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Thomas Hurley

Date

4/17/07

Daytime Phone #

772-595-3100