

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 01, 2004 8:00 am
Secretary of State

03-01-2004 90040 023 ****70.00

DOCUMENT # N00000002949					
1. Entity Name HOBE SOUND ANIMAL PROTECTION LEAGUE, INC.					
Principal Place of Business 4546 SW HONEY TERRACE PALM CITY, FL 34990			Mailing Address 4546 SW HONEY TERRACE PALM CITY, FL 34990		
2. Principal Place of Business		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State		4. FEI Number 65-1015367	
Zip		Country		5. Certificate of Status Desired <input checked="" type="checkbox"/> \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent SHERLOCK, VIRGINIA P 618 EAST OCEAN BLVD., SUITE 5 STUART, FL 34994			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 _____ <small>Signature, typed or printed name of registered agent and the, if applicable. (NOTE: Registered Agent's signature required when reinstating)</small>					
Filing Fee is \$61.25 Due by May 1, 2004		9. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>		\$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	PT SINE, RITA M 4546 SW HONEY TERRACE PALM CITY, FL 34990		TITLE NAME STREET ADDRESS CITY-ST- ZIP	Eleanor Booth 8706 SE Alqozinpi Pl. Hobe Sound, FL 33490 33455	
TITLE NAME STREET ADDRESS CITY-ST- ZIP	D BENDER, PETER 27 MERRIMACK STREET CONCORD, NH 03301		TITLE NAME STREET ADDRESS CITY-ST- ZIP	Pam S Walker 6452 Market St. Palm City, FL 34990	
TITLE NAME STREET ADDRESS CITY-ST- ZIP	D FRENCH, JOAN 299 S BEACH ROAD HOBE SOUND, FL 33455		TITLE NAME STREET ADDRESS CITY-ST- ZIP	Rita M. Sine 4546 SW Honey Terrace Palm City, FL 34990	
TITLE NAME STREET ADDRESS CITY-ST- ZIP	D DOMENCICH, NEFELE 429 S BEACH ROAD HOBE SOUND, FL 33455		TITLE NAME STREET ADDRESS CITY-ST- ZIP	S Allola McGRAW Box 114 Hobe Sound, FL 33455	
TITLE NAME STREET ADDRESS CITY-ST- ZIP	DVS MCGRAW, ALLOLA BOX 114 HOBE SOUND, FL 33455		TITLE NAME STREET ADDRESS CITY-ST- ZIP	[Blank]	
TITLE NAME STREET ADDRESS CITY-ST- ZIP	D CLARK, RITA 146 GOMEZ ROAD HOBE SOUND, FL 33455		TITLE NAME STREET ADDRESS CITY-ST- ZIP	[Blank]	
12. I 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 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>Rita M. Sine</i>			Feb. 27, 2004		
<small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>			<small>Date Daytime Phone #</small>		