2007 NOT-FOR-PROFIT CORPORATION **ANNUAL REPORT**

DOCUMENT # N00000002949

FILED Feb 14, 2007 8:00 am Secretary of State 02-14-2007 90053 008 ****61.25

DOCUMENT # N0000002949 1. Entity Name HOBE SOUND ANIMAL PROTECTION LEAGUE, INC.							02-14-200	07 90053	008 ****6	51.25
6452 SW MARKEL ST 8706			ling Address 06 SE ALGOZZINI PLACE BE SOUND, FL 33455						1 11848 IBER) B(B)B JI	DIII 21 148}
Principal Place of Business - No P.O. Box # 3. Mai			Mailing Address							
Suite, Apt. #, etc.		Suite, A	Suite, Apt. #, etc.			02052007	Chg-NP	CR2E	037 (12/06)	
City & State		City & State				4. FEI Numbe 65-101	5367			pplied For ot Applicable
Zip	Country	Žip		Country			of Status Desire		\$8.75 Add	
	6. Name and Address of Current	Registered Ag	jent	Name		7. Name and	Address of Nev	w Registere	d Agent	
SHERLO	CK, VIRGINIA P			Name						
618 EAST OCEAN BLVD., SUITE 5 STUART, FL 34994				Street Address (er is Not Accepta	able)		
			City					F	L Zip Coo	de
. 8. The above the obliga	named entity submits this statement fo tions of registered agent.	or the purpose o	of changing its req	gistered office o	or registere	ed agent, or bot	h, in the State of	f Florida. Tar	n familiar with,	, and accept
SIGNATURE										
	Signature, typed or printed name of registered agent	and title if applicable	NOTE: R	egistered Agent signa	ture required s	when reinstating)		DATE	:	
	Filing Fee is \$61.25 Due by May 1, 2007	9	. (NOTE: Re). Election Campa Trust Fund Con	aign Financing		\$5.00 May B Added to Fees	F	Make che lorida Dep	ck payable t artment of S	tate
10.	Filing Fee is \$61.25	9 RECTORS). Election Campa Trust Fund Con	aign Financing	A	\$5.00 May B Added to Fees DDITIONS/CHA	e F	Make che lorida Dep	ck payable t artment of S	tate
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12. I hereby certify that the information supplied with this filling 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.

12/07 SIGNATURE AND TYPED OR PRINTED NAME OF BIGNING OFFICER OR DIRECTOR