

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000009298

FILED
Mar 27, 2009
Secretary of State

Entity Name: HOBE SOUND CONTRACTORS SHOWCASE CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

12920 SE SUZANNE DR
HOBE SOUND, FL 33455

New Principal Place of Business:

Current Mailing Address:

PO BOX 1381
HOBE SOUND, FL 33475

New Mailing Address:

P.O. BOX 1381
HOBE SOUND, FL 33475 US

FEI Number: 89-1629703

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WESEL, ERIC T
8512 S.E. DUNCAN ST
HOBE SOUND, FL 33455 US

Name and Address of New Registered Agent:

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.

SIGNATURE:

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: WESEL, ERIC T
Address: 8512 SE DUNCAN STREET
City-St-Zip: HOBE SOUND, FL 33455

Title: T () Delete
Name: TUCKER, K MICHELLE
Address: 8122 SE SHILOH TERRACE
City-St-Zip: HOBE SOUND, FL 33455

Title: VPD () Delete
Name: TUCKER, JAMES B
Address: 8122 S.E. SHILOH TERR
City-St-Zip: HOBE SOUND, FL 33455

Title: SD () Delete
Name: JOHNSON, MARK
Address: 10381 S.E. JUPITER NARROWS DR
City-St-Zip: HOBE SOUND, FL 33455

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: JAMES B. TUCKER

VP

03/27/2009

Electronic Signature of Signing Officer or Director

Date