2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jul 07, 2008
Secretary of State

DOCUMENT# N06000012464

Entity Name: HAPPEHATCHEE CENTER, INC.

Current Principal Place of Business:

8791 CORKSCREW RD
ESTERO, FL 33928

New Principal Place of Business:

Current Mailing Address:

PO BOX 345
ESTERO, FL 33928

New Mailing Address:

FEI Number: 20-8034294 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

PETERSON, ELLEN W
8791 CORKSCREW RD
ESTERO, FL 33928 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: PETERSON, ELLEN W
Address: 8791 CORKSCREW RD
City-St-Zip: ESTERO, FL 33928

Title: VPD ( ) Delete
Name: SMITH, ANN
Address: 14524 STERLING OAKS
City-St-Zip: NAPLES, FL 34110

Title: VPD ( ) Delete
Name: FRIEDMAN, HARRIS
Address: 1225 TOM COKER RD
City-St-Zip: LABELLE, FL 33935

Title: S ( ) Delete
Name: EHAT, NANCY
Address: 11550 WOODMOUNT LN
City-St-Zip: ESTERO, FL 33928

Title: T ( ) Delete
Name: GRANT, GENELLE
Address: 6640 BRIGHT RD
City-St-Zip: NORTH FORT MYERS, FL 33917

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: SEC (X) Change ( ) Addition
Name: FOTOVAT, RUTH KINGI
Address: 12353
City-St-Zip: GREYWOOD CIR., FL 33966

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: ELLEN W. PETERSON MS. 07/07/2008

Electronic Signature of Signing Officer or Director — Date