

2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

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FILED
Feb 19, 2010
Secretary of State

Entity Name: HAPPEHATCHEE CENTER, INC.

Current Principal Place of Business:

8791 CORKSCREW RD
ESTERO, FL 33928

New Principal Place of Business:

8791 CORKSCREW RD
ESTERO, FL 33929 US

Current Mailing Address:

PO BOX 345
ESTERO, FL 33928

New Mailing Address:

PO BOX 345
ESTERO, FL 33929 US

FEI Number: 20-8034294

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

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

Title: VPD
Name: GRANT, GENELLE G MS
Address: 6640 BRIGHT RD.
City-St-Zip: N.FT.MYERS, FL 34110 US

Title: VPD
Name: SMITH, ANN MS
Address: 14524 STERLING OAKS
City-St-Zip: NAPLES, FL 34110 US

Title: SEC
Name: FOTOVAT, RUTH KINGI MS
Address: 12353
City-St-Zip: GREYWOOD CIR., FL 33966 US

Title: TREA
Name: SEGURA, BARBARA MS.
Address: 4632 15THAVE.
City-St-Zip: NAPLES, FL 34116 US

Title: DIR
Name: GRUNINGER, BOBBIELEE MS
Address: 8870 SPRINGWOOD COURT
City-St-Zip: BONITA SPRINGS, FL 34135 US

I hereby 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 all other like empowered.

SIGNATURE: ELLEN W. PETERSON

MS.

02/19/2010

Electronic Signature of Signing Officer or Director

Date