2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N11849

FILED Jan 16, 2009 Secretary of State

Entity Name: HOBE SOUND FINE ARTS LEAGUE, INC.

Current Principal Place of Business: New Principal Place of Business:

8979 SE BRIDGE RD

HOBE SOUND, FL 33455 US

Current Mailing Address: New Mailing Address:

P.O. BOX 993 8979 SE BRIDGE RD

HOBE SOUND, FL 33475 US HOBE SOUND, FL 33455 US

FEI Number: FEI Number Applied For () FEI Number Not Applicable (X) Certificate of Status Desired (X)

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

LOTUFO, ANGELA SCOTT, MARGARET

6323 SE AMES WAY

HOBE SOUND, FL 33455 US

8551 SÉ SOUNDINGS PLACE
HOBE SOUND, FL 33455 US

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: MARGARET A. SCOTT 01/16/2009

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

itle: VD () Delete Title: () Change () Addition

 Name:
 BENNER, MARILYN
 Name:

 Address:
 2666 SWOLDIS PL
 Address:

 City-St-Zip:
 STUART, FL 34997
 City-St-Zip:

Name: SCHAPIRO, CONNIE Name: SQUIER, JOANNA

 Address:
 6236 SE AMES WAY
 Address:
 2394 SW DEEP WOOD PASS

 City-St-Zip:
 HOBE SOUND, FL 33455
 City-St-Zip:
 PALM CITY, FL 34990

Title: PD () Delete Title: PD (X) Change () Addition

Name: LOTUFO, ANGELA Name: KEPP, CAROL

 Address:
 6323 SE AMES WAY
 Address:
 4389 SE SCOTLAND CAY WAY

 City-St-Zip:
 HOBE SOUND, FL 33455 US
 City-St-Zip:
 STUART, FL 34997 US

Title: SD () Delete Title: () Change () Addition

Name: GRALEWSKI, MARGARET Name:

 Address:
 2929 SE OCEAN BLVD 123-8
 Address:

 City-St-Zip:
 STUART, FL 34996
 City-St-Zip:

Title: TD () Delete Title: TD (X) Change () Addition

 Name:
 SCOTT, MARGARET
 Name:
 SCOTT, MARGARET

 Address:
 8551 SE SOUNDUNGS PL
 Address:
 8551 SE SOUNDINGS PL

 City-St-Zip:
 HOBE SOUND, FL 33455
 City-St-Zip:
 HOBE SOUND, FL 33455

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: MARGARET A. SCOTT TD 01/16/2009