

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N28497

FILED
Apr 14, 2009
Secretary of State

Entity Name: SEA PINES OF HOBE SOUND HOMEOWNERS' ASSOCIATION, INC.

Current Principal Place of Business:

10879 SE SEA PINES CIRCLE
HOBE SOUND, FL 33455

New Principal Place of Business:

Current Mailing Address:

543 NW LAKE WHITNEY PL STE 101-102
PORT SAINT LUCIE, FL 34986

New Mailing Address:

FEI Number: 65-0325561

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

INGLIS, STEVE
1930 COMMERCE LN.
SUITE #1
JUPITER, FL 33458 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: RAYMOND, CARULLI
Address: 10807 SE SEA PINES CIR
City-St-Zip: HOBE SOUND, FL 33455

Title: D () Delete
Name: VARRICCHIO, TONY
Address: 10918 SE STONEHILL LN
City-St-Zip: HOBE SOUND, FL 33455

Title: VPD () Delete
Name: DARRETTA, JOE
Address: 11133 SE SEAPINES CIR
City-St-Zip: HOBE SOUND, FL 33455

Title: TD () Delete
Name: GRAY, SONJA
Address: 10820 SE SEA PINES CIR
City-St-Zip: HOBE SOUND, FL 33455

Title: SD () Delete
Name: KEEGAN, ANN
Address: 8099 SE BRISTLE CONE PL
City-St-Zip: HOBE SOUND, FL 33455

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: T2D (X) Change () Addition
Name: YUSCZYK, BILLIE
Address: 11175 SE SEA PINES CIRCLE
City-St-Zip: HOBE SOUND, FL 33455

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

Title: TD (X) Change () Addition
Name: GRAUSO, DOROTHY
Address: 10880 SE SEA PINES CIR
City-St-Zip: HOBE SOUND, FL 33455

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

Title: 2VPD () Change (X) Addition
Name: PRESLER, MINDY
Address: 10933 SE SEA PINES CIRCLE
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: RAYMOND CARULLI

PRES

04/14/2009

Electronic Signature of Signing Officer or Director

Date