## 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N49312

FILED Jun 15, 2009 Secretary of State

Entity Name: HOBIE FLEET 11 INC.

Current Principal Place of Business:		New Principal Place of Business:	
	VN LAKE DR MERE, FL 34786 US		
urrent N	lailing Address:	New Mailing Address:	
	VN LAKE DR MERE, FL 34786 US		
accordan	: 26-4885596 FEI Number Applied For ( ) ace with s. 607.193(2)(b), F.S., the corporation did		. ,
ame and	d Address of Current Registered Agent:	Name and Address of New Registered Agen	t:
728 DOV	, MARK J VN LAKE DR.		
e above		e purpose of changing its registered office or registered age	nt, or botl
e above the State	e named entity submits this statement for the e of Florida.	e purpose of changing its registered office or registered age	nt, or botl
ne above the State	e named entity submits this statement for the e of Florida. RE:		nt, or botl
ie above the Stati	e named entity submits this statement for the e of Florida. RE: Electronic Signature of Registered A	ngent Date	
ne above the State GNATUI	e named entity submits this statement for the e of Florida. RE:		
ne above the State GNATUI	e named entity submits this statement for the e of Florida. RE: Electronic Signature of Registered A	ngent Date	
ne above the State GNATUI FFICER le: le: lme: dress:	e named entity submits this statement for the e of Florida.  RE:  Electronic Signature of Registered A  S AND DIRECTORS:  D () Delete ADIANO, LOUIE 2120 W. PINE STREET	ADDITIONS/CHANGES TO OFFICERS AND I  Title: ( ) Change ( ) Addition Name: Address:	
ne above the State GNATUI FFICER le: ume: dress: ty-St-Zip: le: ume: dress:	e named entity submits this statement for the e of Florida.  RE:  Electronic Signature of Registered A  S AND DIRECTORS:  D () Delete ADIANO, LOUIE 2120 W. PINE STREET ORLANDO, FL 32805  D () Delete LOEWEN, RICK 840 GROVESMERE LOOP	ADDITIONS/CHANGES TO OFFICERS AND I  Title: ( ) Change ( ) Addition Name: Address: City-St-Zip:  Title: ( ) Change ( ) Addition Name: Address:	

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: MARK J BOXMAN DIR 06/15/2009