

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N95000005564

FILED
Apr 12, 2006
Secretary of State

Entity Name: HOBE SOUND COMMERCE CENTER CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

8852 SE ROBWN STREET
HOBE SOUND, FL 33455

New Principal Place of Business:

Current Mailing Address:

8852 SE ROBWN STREET
HOBE SOUND, FL 33455

New Mailing Address:

8840 SE ROBWN STREET
HOBE SOUND, FL 33455

FEI Number:

FEI Number Applied For ()

FEI Number Not Applicable (X)

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

MURPHY, WILLIAM H
8852 SE ROBWN STREET
HOBE SOUND, FL 33455 US

Name and Address of New Registered Agent:

MURPHY, WILLIAM H
8840 SE ROBWN STREET
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: WILLIAM H. MURPHY

04/12/2006

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: SANNER, GARY T
Address: 9038 SE STAR ISLAND WAY
City-St-Zip: HOBE SOUND, FL 33455

Title: VD () Delete
Name: BEEBE, JAMES S
Address: 38W722 SILVER GLENN ROAD
City-St-Zip: ST. CHARLES, IL 60175

Title: STD () Delete
Name: MURPHY, WILLIAM H
Address: 221 OLD DIXIE HIGHWAY UNIT 20
City-St-Zip: TEQUESTA, IL 33469

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: STD (X) Change () Addition
Name: MURPHY, WILLIAM H
Address: 8840 SE ROBWN STREET
City-St-Zip: HOBE SOUND, FL 33455

I hereby certify that the information supplied with this filing does not qualify for the 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: WILLIAM H. MURPHY

SC/T

04/12/2006

Electronic Signature of Signing Officer or Director

Date