

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N97000004949

FILED
Jan 24, 2007
Secretary of State

Entity Name: HOBE SOUND YOUTH ATHLETIC ASSOCIATION, INC.

Current Principal Place of Business:

PO BOX 1767
HOBE SOUND, FL 33475

New Principal Place of Business:

8313 SE WOODMERE STREET
HOBE SOUND, FL 33455

Current Mailing Address:

PO BOX 1767
HOBE SOUND, FL 33475

New Mailing Address:

FEI Number: 65-0771578 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

NESS, GREG
8089 SE ORCHARD TERRACE
HOBE SOUND, FL 33455 US

Name and Address of New Registered Agent:

SMITHWICK, ROBERT P II
8313 SE WOODMERE 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: ROBERT P. SMITHWICK II

01/24/2007

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: NESS, GREG
Address: 8089 SE ORCHARD TERRACE
City-St-Zip: HOBE SOUND, FL 33455

Title: VP () Delete
Name: ARCHER, TODD
Address: 7249 SE HOBE TERRACE
City-St-Zip: HOBE SOUND, FL 33455

Title: T () Delete
Name: COELHO, LINDA
Address: 19086 HOMEWOOD AVE
City-St-Zip: TEQUESTA, FL 33469

Title: D () Delete
Name: BRINK, JAMES C
Address: 11000 SE FEDERAL HWY #71
City-St-Zip: HOBE SOUND, FL 33455

Title: D () Delete
Name: STECK, JEANAVETTE
Address: 8827 SE SHARON ST.
City-St-Zip: HOBE SOUND, FL 33455

Title: D (X) Delete
Name: HARRIS, SOLOMON
Address: 8529 CITRUS WAY
City-St-Zip: HOBE SOUND, FL 33455

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: SMITHWICK, ROBERT P II
Address: 8313 SE WOODMERE STREET
City-St-Zip: HOBE SOUND, FL 33455

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

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

Title: S (X) Change () Addition
Name: KEFAUVR, DOROTHY
Address: 5674 ORANG BLOSSOM TRAIL
City-St-Zip: HOBE SOUND, FL 33455

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

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

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: ROBERT P. SMITHWICK II

PRES

01/24/2007

Electronic Signature of Signing Officer or Director

Date