2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N97000004949

FILED Jan 21, 2008 Secretary of State

Entity Name: HOBE SOUND YOUTH ATHLETIC ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business: 8313 SE WOODMERE STREET HOBE SOUND, FL 33455 **Current Mailing Address: New Mailing Address:** PO BOX 1767 HOBE SOUND, FL 33475 FEI Number: 65-0771578 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: SMITHWICK, ROBERT PIL 8313 SE WOODMERE STREET HOBE SOUND, FL 33455 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Change () Addition () Delete SMITHWICK, ROBERT P II Name: Name: 8313 SE WOODMERE STREET Address: Address: City-St-Zip: HOBE SOUND, FL 33455 City-St-Zip: Title: () Delete Title: () Change () Addition Name: ARCHER, TODD Name: Address: 8280 SE CAMELLIA DRIVE Address: City-St-Zip: HOBE SOUND, FL 33455 City-St-Zip: Title: () Delete Title: () Change () Addition COELHO, LINDA Name: Name: Address: 19086 HOMEWOOD AVE Address: City-St-Zip: TEQUESTA, FL 33469 City-St-Zip: Title: (X) Delete Title: () Change () Addition Name: KEFAUVR, DOROTHY Name: 5674 ORANG BLOSSOM TRAIL Address: Address: City-St-Zip: HOBE SOUND, FL 33455 City-St-Zip: Title: Title: (X) Delete () Change () Addition STECK, JEANAVETTE Name: Name: 8827 SE SHARON ST. Address: Address: City-St-Zip: HOBE SOUND, FL 33455 City-St-Zip:

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: ROBERT P. SMITHWICK II PRES 01/21/2008