

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N98000004663

1. Entity Name

HOBE SOUND CITIZENS ALLIANCE, INC.

FILED
Jan 24, 2000 8:00 am
Secretary of State

01-24-2000 90012 009 ****61.25

Principal Place of Business

Mailing Address

9684 SE GLEASON STREET
HOBE SOUND FL 33455

9684 SE GLEASON STREET
HOBE SOUND FL 33455-3506

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

65-0857188

Applied For

Not Applicable

5. Certificate of Status Desired

☐ \$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

SHERLOCK, VIRGINIA P
1855 S KANNER HWY
STUART FL 34995

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW:
FEE IS \$61.25

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make Check Payable to
Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE PD ☐ Delete
NAME MERRILL, MARY A
STREET ADDRESS 9684 SE GLEASON STREET
CITY-ST-ZIP HOBE SOUND FL 33455

TITLE D ☐ Change ☐ Addition
NAME RUCKMAN, MARY LOU
STREET ADDRESS 12803 S.E. Royal Troon Ct.
CITY-ST-ZIP Hobe Sound, FL 33455

TITLE VTD ☐ Delete
NAME COX, JACK
STREET ADDRESS 12130 SE INDIAN RIVER ROAD
CITY-ST-ZIP HOBE SOUND FL 33455

TITLE D ☐ Change ☐ Addition
NAME STEWART, MICHAEL
STREET ADDRESS 12130 S.E. Indian St.
CITY-ST-ZIP Hobe Sound, FL 33455

TITLE SD ☐ Delete
NAME WEIGEL, DOTTY
STREET ADDRESS 12331 SE INDIAN RIVER ROAD
CITY-ST-ZIP HOBE SOUND FL 33455

TITLE D ☐ Change ☐ Addition
NAME ROBINSON, FREEMAN
STREET ADDRESS 8602 S.E. Driftwood
CITY-ST-ZIP Hobe Sound, FL 33455

TITLE D ☐ Delete
NAME BLAISDELL, SUE
STREET ADDRESS 12201 S.E. Heckler Dr.
CITY-ST-ZIP Hobe Sound, FL 33455

TITLE D ☐ Change ☐ Addition
NAME SMITH, DONALD R.
STREET ADDRESS 10421 S.E. Soundings Dr.
CITY-ST-ZIP Hobe Sound, FL 33455

TITLE D ☐ Delete
NAME BRILEY, SUZANNE
STREET ADDRESS 12065 S.E. Zeus St.
CITY-ST-ZIP Hobe Sound, FL 33455

TITLE D ☐ Change ☐ Addition
NAME MILLER, GILBERT
STREET ADDRESS Hobe Sound, FL 33455

TITLE D ☐ Delete
NAME OVERHOLT, RUSS
STREET ADDRESS 9042 S.E. Appolo St.
CITY-ST-ZIP Hobe Sound, FL 33455

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE REQUIRED
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/6/2000

561-627-5605

Daytime Phone #

CR2E037 (9/99)