

# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N98000004663

FILED  
May 03, 2007  
Secretary of State

**Entity Name:** HOBE SOUND CITIZENS ALLIANCE, INC.

**Current Principal Place of Business:**

618 EAST OCEAN BLVD  
STE 5  
STUART, FL 34995

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 761  
HOBE SOUND, FL 33475

**New Mailing Address:**

**FEI Number:** 65-0857188      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**  
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

**Name and Address of Current Registered Agent:**

**Name and Address of New Registered Agent:**

SHERLOCK, VIRGINIA P  
618 EAST OCEAN BLVD  
STE 5  
STUART, FL 34994 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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: D ( ) Delete  
Name: SNOOK, MARIE  
Address: 10472 SE AMBERJACK COURT  
City-St-Zip: HOBE SOUND, FL 33455

Title: D ( ) Delete  
Name: WINSTON, KATHY  
Address: 8328 SE PINE CIRCLE  
City-St-Zip: HOBE SOUND, FL 33455

Title: D ( ) Delete  
Name: BRILEY, SUZANNE  
Address: 12065 S.E. ZEUS STREET  
City-St-Zip: HOBE SOUND, FL 33455

Title: D ( ) Delete  
Name: OVERHOLT, RUSS  
Address: 9042 S.E. APPOLO STREET  
City-St-Zip: HOBE SOUND, FL 33455

Title: P ( ) Delete  
Name: SMITH, DON  
Address: 10421 SE SOUNDINGS DRIVE  
City-St-Zip: HOBE SOUND, FL 33455

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

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

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

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 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: DON SMITH

P

05/03/2007

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date