## **2007 FOR PROFIT CORPORATION** ANNUAL REPORT

## **FILED** Apr 27, 2007 08:00 Al Secretary of State DOCUMENT # P95000097924 1. Entity Name HOBE SOUND RANCH, INC. Principal Place of Business Mailing Address 4500 PGA BLVD. STE 207 4500 PGA BLVD, STE 207 PALM BEACH GARDENS, FL 33418 PALM BEACH GARDENS, FL 33418 2. Principal Place of Business - No P.O. Box # 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. CR2E034 (12/06) 03222007 Chg-P City & State Applied For City & State 4. FEI Number 65-0634095 Not Applicable Country Zip Country \$8.75 Additional Zip 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name BRANDT, PHILLIP L Street Address (P.O. Box Number is Not Acceptable) 4500 PGA BLVD., SUITE 207 PALM BEACH GARDENS, FL 33418 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE Signature, typed or printed name of registered agent and title if applicable, (NOTE: Registered Agent signature regulred when reinstating) 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 Trust Fund Contribution. Added to Fees After May 1, 2007 Fee will be \$550.00 OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. 11. DP TITLE XX Change Addition TITLE ☐ Defete DV NAME GALUI, JUDITH M NAME STREET ADDRESS STREET ADDRESS 4500 PGA BLVD., SUTIE 207 CITY-ST-ZIP PALM BEACH GARDENS, FL 33418 CITY-ST-ZIP DP Change ☐ Addition ☐ Delete TITLE TITLE STEPHANOS, DIANE L. NAME STREET ADDRESS STREET ADDRESS 4500 PGA BLVD., SUITE 207 CITY-ST-ZIP CITY-ST-ZIP PALM BEACH GARDENS, FL 33418 Delete Change ☐ Addition TITLE DST TITLE DIVOSTA, CATHY NAME NAME STREET ADDRESS STREET ADDRESS 4500 PGA BLVD., SUITE 207 CITY-ST-ZIP PALM BEACH GARDENS, FL 33418 CITY-ST-ZIP Change Addition ☐ Delete TITLE DV TITI F 000000739454 DIVOSTA, GUY M NAME NAME 05/14/07-80028-011 150.00 STREET ADDRESS STREET ADDRESS 4500 PGA BLVD, STE. 207 CITY-ST-ZIP PALM BEACH GARDENS, FL. 33418 CITY-ST-ZIP TITLE Change Addition ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE Change Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 607, 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.

CITY-ST-ZIP

SIGNATURE

CITY-ST-ZIP

Cathy A. DiVosta

3/28/07

561/691-9050