

**2013 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N00000002949

**Entity Name:** HOBE SOUND ANIMAL PROTECTION LEAGUE, INC.**Current Principal Place of Business:**6452 SW MARKEL ST  
PALM CITY, FL 34990**Current Mailing Address:**P. O. BOX 1693  
PALM CITY, FL 34991 US**FEI Number: 65-1015367****Certificate of Status Desired: No****Name and Address of Current Registered Agent:**SHERLOCK, VIRGINIA P  
618 EAST OCEAN BLVD., SUITE 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**Officer/Director Detail :**

Title	PRES
Name	SHERLOCK, VIRGINIA P
Address	618 EAST OCEAN BLVD., SUITE 5
City-State-Zip:	STUART FL 34994

Title	EX D
Name	GLOVER, PAULINE
Address	6452 SW MARKEL
City-State-Zip:	PALM CITY FL 34990

Title	V P
Name	STEVENS, SHAREEN
Address	6605 SE BROADMOOR LN.
City-State-Zip:	STUART FL 34997

Title	TREA
Name	MCKEY, SANDE
Address	6924 SW CINNAMON CT.
City-State-Zip:	STUART FL 34997

Title	DIRECTOR
Name	CARGILL, STEVE
Address	8637 SE SHARON ST.
City-State-Zip:	HOBE SOUND FL 33455

Title	D
Name	PAVELA, JOHN
Address	1404 VILLA JUNO DR. SO.
City-State-Zip:	JUNE BEACH FL 33408

Title	SECRETARY
Name	BARNES, ANTONIA
Address	3100 SW BOATRAMP
City-State-Zip:	PALM CITY FL 34990

*I hereby 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 all other like empowered.*

**SIGNATURE: SANDE MCKEY****TREASURER****01/17/2013**\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail\_\_\_\_\_  
Date