

2018 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N11043

Entity Name: HIBISCUS CHILDREN'S CENTER, INC.

Current Principal Place of Business:

2920 S. 25 STREET
FORT PIERCE, FL 34981

Current Mailing Address:

2920 S. 25 STREET
FORT PIERCE, FL 34981 US

FEI Number: 59-2632361

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

SEXTON, PAUL
2920 S. 25 STREET
FORT PIERCE, FL 34981 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: PAUL SEXTON

04/09/2018

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title DIRECTOR
Name HOLCZER, LOIS
Address 891 NW RED PINE WAY
City-State-Zip: JENSEN BEACH FL 34957

Title CEO
Name SEXTON, PAUL
Address 2920 S 25TH STREET
City-State-Zip: FORT PIERCE FL 34981

Title DIRECTOR
Name EK, ARMUND
Address 2415 CLUB DRIVE
City-State-Zip: VERO BEACH FL 32963

Title DIRECTOR
Name DAMSON, BARRIE
Address 6853 SE ISLE WAY
City-State-Zip: STUART FL 34996

Title DIRECTOR
Name HORNER, BECKETT
Address 7865 15TH LANE
City-State-Zip: VERO BEACH FL 32966

Title DIRECTOR
Name TINA , HART
Address 1374 NE SKYLINE DR
City-State-Zip: JENSEN BEACH FL 34957

Title SECRETARY
Name NOONAN, FRANK
Address 6401 SE INLET WAY
City-State-Zip: STUART FL 34996

Title TREASURER
Name SHAPIRO, ALLEN
Address 713 SHORE DRIVE
City-State-Zip: VERO BEACH FL 32963

Continues on page 2

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: CATHY CANADA

CFO

04/09/2018

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title VC
Name WALKER, TRAVIS
Address 1342 SW GAHAF AVE
City-State-Zip: PORT SAINT LUCIE FL 34953

Title DIRECTOR
Name EMMELUTH, JEFFREY
Address 2312 SE SHIPPING RD
City-State-Zip: PORT SAINT LUCIE FL 34952

Title DIRECTOR
Name PETRY, FERNANDO
Address 2100 NEBRASKA AVE., STE 105
City-State-Zip: FORT PIERCE FL 34950

Title COO
Name BEALE, CAROLINE
Address 2920 S. 25TH STREET
City-State-Zip: FORT PIERCE FL 34981

Title DIRECTOR
Name HARRELL, MIKE
Address 2920 S. 25TH STREET
City-State-Zip: FORT PIERCE FL 34981

Title DIRECTOR
Name LAPORTA, MICHAEL
Address 2920 S. 25TH STREET
City-State-Zip: FORT PIERCE FL 34981

Title DIRECTOR
Name PRICE, CLAY
Address 2920 S. 25TH STREET
City-State-Zip: FORT PIERCE FL 34981

Title DIRECTOR
Name YOUNG, MARK
Address 2920 S. 25TH STREET
City-State-Zip: FORT PIERCE FL 34981

Title CHAIRMAN
Name WILSON, DAVID
Address 100 LA COSTA COURT
City-State-Zip: VERO BEACH FL 32963

Title DIRECTOR
Name MULROONEY, DEBRA
Address 9955 SW TORRIENTE LN
City-State-Zip: PORT ST. LUCIE FL 34986

Title CFO
Name CANADA, CATHY
Address 2920 S. 25TH STREET
City-State-Zip: FORT PIERCE FL 34981

Title DIRECTOR
Name BRADEN, DAN
Address 2920 S. 25 STREET
City-State-Zip: FORT PIERCE FL 34981

Title DIRECTOR
Name KEHLENBACH, MARYANNE
Address 2920 S. 25TH STREET
City-State-Zip: FORT PIERCE FL 34981

Title DIRECTOR
Name PETRY, FERNANDO DR.
Address 2920 S. 25 STREET
City-State-Zip: FORT PIERCE FL 34981

Title DIRECTOR
Name WOOLSTON, WILLIAM
Address 2920 S. 25TH STREET
City-State-Zip: FORT PIERCE FL 34981

Title CAO
Name BOCCABELLA, LOUIS
Address 2920 S 25TH STREET
City-State-Zip: FORT PIERC FL 34981