

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P96000062653

Entity Name: HCM INDUSTRIES, INC.

FILED  
Mar 27, 2009  
Secretary of State

**Current Principal Place of Business:**

1515 SOUTH FEDERAL HIGHWAY  
SUITE 401  
BOCA RATON, FL 33432

**New Principal Place of Business:**

**Current Mailing Address:**

1515 SOUTH FEDERAL HIGHWAY  
SUITE 401  
BOCA RATON, FL 33432

**New Mailing Address:**

FEI Number: 65-0691183      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

CORPORATION SERVICE COMPANY  
1201 HAYS STREET  
TALLAHASSEE, FL 32301      US

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

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

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: PCEO ( ) Delete  
Name: PORTER, DARRYL  
Address: 1515 S FEDERAL HWY STE 401  
City-St-Zip: BOCA RATON, FL 33432

Title: CFO ( ) Delete  
Name: PORTER, DARRYL  
Address: 1515 S FEDERAL HWY STE 401  
City-St-Zip: BOCA RATON, FL 33432

Title: SVP ( ) Delete  
Name: BRISSON, MICHAEL  
Address: 1515 S FEDERAL HWY STE 401  
City-St-Zip: BOCA RATON, FL 33432

Title: VPPM ( ) Delete  
Name: DECARLO, FRANK  
Address: 1515 S FEDERAL HWY STE 401  
City-St-Zip: BOCA RATON, FL 33432

Title: VPSO ( ) Delete  
Name: NARCISI, RICHARD  
Address: 1515 S FEDERAL HWY STE 401  
City-St-Zip: BOCA RATON, FL 33432

Title: VPFI ( ) Delete  
Name: SARIOL, CARLOS  
Address: 1515 S FEDERAL HWY #401  
City-St-Zip: BOCA RATON, FL 33432

**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:

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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: MICHAEL BRISSON

SVP

03/27/2009

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date