## 2015 FOREIGN NOT FOR PROFIT CORPORATION ANNUAL REPORT

#### DOCUMENT# 841118

Entity Name: HEARING HEALTH FOUNDATION, INC.

## **Current Principal Place of Business:**

363 SEVENTH AVENUE 10TH FLOOR NEW YORK, NY 10001

## **Current Mailing Address:**

310 W. 20TH STREET SUITE 300 KANSAS CITY, MO 64108 US

## FEI Number: 13-1882107

## Name and Address of Current Registered Agent:

CORPORATE CREATIONS NETWORK, INC. 11380 PROSPERITY FARMS RD., #221E PALM BEACH GARDENS, FL 33410 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

## Officer/Director Detail :

Oncer/Director Detail.					
Title	TREASURER	Title	CHAIR		
Name	NOLAN, MICHAEL	Name	EBERTS, SHARI		
Address	363 SEVENTH AVENUE 10TH FLOOR	Address	363 SEVENTH AVENUE 10TH FLOOR		
City-State-Zip:	NEW YORK NY 10001	City-State-Zip:	NEW YORK NY 10001		
Title	SECRETARY	Title	DIRECTOR		
Name	HARRIS, ROGER	Name	TALLMAN, JR., CLIFFORD		
Address	363 SEVENTH AVENUE 10TH FLOOR	Address	363 SEVENTH AVENUE 10TH FLOOR		
City-State-Zip:	NEW YORK NY 10001	City-State-Zip:	NEW YORK NY 10001		
Title	COUNCILREPRESENTATIVE	Title	DIRECTOR		
Name	DUBNO, JUDY	Name	BOUCAI, ROBERT		
Address	363 SEVENTH AVENUE 10TH FLOOR	Address	363 SEVENTH AVENUE 10TH FLOOR		
City-State-Zip:	NEW YORK NY 10001	City-State-Zip:	NEW YORK NY 10001		
Title	DIRECTOR	Title	DIRECTOR		
Name	GINZBURG, REBECCA	Name	KEITHLEY, ELIZABETH		
Address	363 SEVENTH AVENUE	Address	363 SEVENTH AVENUE		
	10TH FLOOR		10TH FLOOR		
City-State-Zip:		City-State-Zip:	10TH FLOOR NEW YORK NY 10001		

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CEO

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: CLAIRE SCHULTZ

Electronic Signature of Signing Officer/Director Detail

# FILED Jan 12, 2015 Secretary of State CC8333554716

Certificate of Status Desired: No

Date

#### **Officer/Director Detail Continued :**

Title	DIRECTOR	Title	CEO
Name	ORLIN, PAUL E	Name	CLAIRE, SCHULTZ
Address	363 SEVENTH AVENUE 10TH FLOOR	Address	363 SEVENTH AVENUE 10TH FLOOR
City-State-Zip:	NEW YORK NY 10001	City-State-Zip:	NEW YORK NY 10001
Title	DIRECTOR	Title	DIRECTOR
Name	WILLIAMS, NANCY	Name	STEYGER, PETER PHD
Address	363 SEVENTH AVENUE 10TH FLOOR	Address	363 SEVENTH AVENUE 10TH FLOOR
City-State-Zip:	NEW YORK NY 10001	City-State-Zip:	NEW YORK NY 10001
Title	DIRECTOR	Title	DIRECTOR
ritte	DIRECTOR	The	DIRECTOR
Name	SMITH, CHRIS	Name	HAYNES, DAVID
Address	363 SEVENTH AVENUE 10TH FLOOR	Address	363 SEVENTH AVENUE 10TH FLOOR
City-State-Zip:	NEW YORK NY 10001	City-State-Zip:	NEW YORK NY 10001