2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F06000005258

Entity Name: HHC SEAGATE, INC.

FILED Jan 15, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 601 NO. CONGRESS AVE. SUITE 114 DELRAY BEACH, FL 33445 **New Mailing Address: Current Mailing Address:** 400 LINDEN OAKS DR ROCHESTER, NY 14625 FEI Number: 20-5335289 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: WILSON, E. ANTHONY 601 NORTH CONGRESS AVE STE 114 DELRAY BEACH, FL 33445 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: CFO () Delete Title: () Change () Addition WILSON, E. ANTHONY Name: Name: 601 NORTH CONGRESS AVE STE 114 Address: Address: City-St-Zip: DELRAY BEACH, FL 33445 City-St-Zip: Title: **VPS** Title: () Delete () Change () Addition Name: GRAUE, GARRETT Name: 601 NORTH CONGRESS AVE STE 114 Address: Address: DELRAY BEACH, FL 33445 City-St-Zip: City-St-Zip: Title: Title: () Delete () Change () Addition BLANK, THOMAS W Name: Name: 400 LINDEN OAKS DR Address: Address: City-St-Zip: ROCHESTER, NY 14625 City-St-Zip: Title: CFO () Delete Title: () Change () Addition PEEK, RALPH L Name: Name: Address: 400 LINDEN OAKS DR Address: City-St-Zip: ROCHESTER, NY 14625 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: RALPH L. PEEK CFO 01/15/2009