## 2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000015752

Entity Name: HC, LLC

FILED Apr 17, 2006 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

1301 RIVERPLACE BLVD. 818 A1A NORTH SUITE 1700 SUITE 207-C

JACKSONVILLE, FL 32207 US PONTE VEDRA BEACH, FL 32082 US

Current Mailing Address: New Mailing Address:

1301 RIVERPLACE BLVD. 818 A1A NORTH SUITE 1700 SUITE 207-C

JACKSONVILLE, FL 32207 US PONTE VEDRA BEACH, FL 32082 US

FEI Number: 20-1469481 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:

VOLPE, TIMOTHY W ESQ. 1301 RIVERPLACE BLVD. SUITE 1700 JACKSONVILLE, FL 32207 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

MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES:

e: MGRM ( ) Delete Title: MGRM (X) Change ( ) Addition

Name: CAWLEY, PHILIP C Name: CAWLEY, PHILIP C
Address: 737 SORREL LANE Address: 117 CALLE NORTE

City-St-Zip: ALPHARETTA, GA 30005 US City-St-Zip: ST. AUGUSTINE, FL 32095 US

Title: MGRM ( ) Delete Title: ( ) Change ( ) Addition

Name:HOWSON, BRUCE KName:Address:109 MARSH REED LANEAddress:City-St-Zip:PONTE VEDRA BEACH, FL 32082 USCity-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: TIMOTHY W. VOLPE, ESQ. RA 04/17/2006