


2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Jan 25, 2005 8:00 am
Secretary of State

01-25-2005 90086 046 ****55.00

DOCUMENT # M03000003350	
1. Entity Name HHC, LLC	

Principal Place of Business 300 WILLOWBROOK OFFICE PARK FAIRPORT, NY 14450	Mailing Address 400 LINDEN OAKS DRIVE ROCHESTER, NY 14625
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DO NOT WRITE IN THIS SPACE



01032005No Chg-LLC

CR2E083 (10/03)

4. FEI Number 42-1590600	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324
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8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE	Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)	DATE
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Filing Fee is \$50.00
Due by May 1, 2005

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR SANDS, RICHARD 300 WILLOWBROOK OFFICE PARK FAIRPORT, NY 14450
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PRESIDENT THOMAS W BLANK 400 LINDEN OAKS DRIVE ROCHESTER, N.Y. 14625
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11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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: <u>Richard A. Sands CFO</u> <u>RALPH L. PEEK</u>	Date <u>1/3/05</u>	Daytime Phone # <u>585-419-4044</u>
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE		