

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000083111

Entity Name: H & C DEVELOPMENT, INC.

FILED
Apr 24, 2008
Secretary of State

Current Principal Place of Business:

CENTRAL FLORIDA EQUIPMENT
4449 OLD WINTER GARDEN RD.
ORLANDO, FL 32811

New Principal Place of Business:

CENTRAL FLORIDA EQUIPMENT
145 TREMONT AVE
ORLANDO, FL 32811

Current Mailing Address:

PO BOX 67
FERNDALE, FL 347290067

New Mailing Address:

FEI Number: 59-3741036

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BRAINARD, COLLEEN M
15345 MALLORY LANE
FERNDALE, FL 34729 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: P () Delete
Name: BRAINARD, HARVEY J
Address: 15345 MALLORY LANE
City-St-Zip: FERNDALE, FL 34729

Title: VST () Delete
Name: BRAINARD, COLLEEN M
Address: 15345 MALLORY LANE
City-St-Zip: FERNDALE, FL 34729

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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: COLLEEN M BRAINARD

VST

04/24/2008

Electronic Signature of Signing Officer or Director

Date