

# FILE NOW: FILING FEE IS \$61.25

NONPROFIT  
CORPORATION  
ANNUAL REPORT  
**1996**



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # **P04476**

(8)

1. Corporation Name

**H&C COMMUNICATIONS, INC.**



Principal Place of Business

Mailing Address

**2131 SAN FELIPE  
HOUSTON TE 77019-5620  
US**

**2131 SAN FELIPE  
HOUSTON TE 77019-5620  
US**

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

23 City & State

27 City & State

24 Zip

25 Country

29 Zip

30 Country

3. Date Incorporated or Qualified  
**12/26/1984**

3a. Date of Last Report  
**05/01/1995**

4. FEI Number

**59-2447948**

Applied For  
Not Applicable

5. Certificate of Status Desired

☐

**\$8.75 Additional  
Fee Required**

6. Election Campaign Financing  
Trust Fund Contribution

☐

**\$5.00 May Be  
Added to Fees**

8. This corporation has liability for intangible tax under s. 199.032,  
Florida Statutes ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**CT CORPORATION SYSTEM  
1200 S. PINE ISLAND ROAD  
PLANTATION FL 33324**

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

**FL**

85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE **VS** ☐ DELETE  
NAME **BECKWORTH, LAURA H.**  
STREET ADDRESS **2131 SAN FELIPE**  
CITY-ST-ZIP **HOUSTON TX**

1.1 TITLE ☐ Change ☐ Addition  
1.2 NAME  
1.3 STREET ADDRESS  
1.4 CITY-ST-ZIP

TITLE **D** ☐ DELETE  
NAME **CATTO, JESSICA HOBBY**  
STREET ADDRESS **2131 SAN FELIPE**  
CITY-ST-ZIP **HOUSTON TX**

2.1 TITLE ☐ Change ☐ Addition  
2.2 NAME  
2.3 STREET ADDRESS  
2.4 CITY-ST-ZIP

TITLE **D** ☒ DELETE  
NAME **HOBBY, OVETA CULP**  
STREET ADDRESS **2131 SAN FELIPE**  
CITY-ST-ZIP **HOUSTON TX**

3.1 TITLE ☐ Change ☒ Addition  
3.2 NAME **Henry E. Catto**  
3.3 STREET ADDRESS **2131 San Felipe**  
3.4 CITY-ST-ZIP **Houston, TX 77019**

TITLE **D** ☐ DELETE  
NAME **HOBBY, WILLIAM P.**  
STREET ADDRESS **2131 SAN FELIPE**  
CITY-ST-ZIP **HOUSTON TX**

4.1 TITLE ☐ Change ☐ Addition  
4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY-ST-ZIP

TITLE **VD** ☐ DELETE  
NAME **HOBBY, DIANA P.**  
STREET ADDRESS **2131 SAN FELIPE**  
CITY-ST-ZIP **HOUSTON TX**

5.1 TITLE ☐ Change ☐ Addition  
5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY-ST-ZIP

TITLE **PTD** ☐ DELETE  
NAME **LEESON, CATHY**  
STREET ADDRESS **2131 SAN FELIPE**  
CITY-ST-ZIP **HOUSTON TX**

6.1 TITLE ☐ Change ☐ Addition  
6.2 NAME  
6.3 STREET ADDRESS  
6.4 CITY-ST-ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

*Cathy Leeson, President*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**3/4/96**

**(713) 521-9020**

Date

Daytime Phone #

CR2E037 (12/95)