2008 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED Apr 14, 2008 08:00 Al Secretary of State DOCUMENT # P06000021674 1. Entity Name HERNANDO HEARING CENTERS, INC. Principal Place of Business Mailing Address 14431 STERLING RUN 3389 MARINER BLVD. SPRING HILL FL 34608 SPRING HILL FL 34609 2. Principal Place of Business - No P.O. Box # 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #. etc. 1st MOORE CR2E034 (10/07) City & State City & State 4. FEI Number Applied For 20-4310617 Not Applicable Zφ Country Zio Country \$8.75 Additional Certificate of Status Desired. Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name ARNETT, ERICK Street Address (P.O. Box Number is Not Acceptable) 14468 SURREY BEND SPRING HILL FL 34609 City Zip Code 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, typod or printed pame of registried agent and the if applicable (NOTE: Recisived Appril signature required when reinstating) DATE FILE NOWIII FEE IS \$150.00 \$5.00 May Be 9. Election Campaign Financing After May 1, 2008 Fee Will Be \$550.00 Trust Fund Centribution. Added to Fees Make Check Payable to Florida Department of State: OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. 11. PD TITLE Delete TITLE ☐ Chance Addition NAME ARNETT, ERICK U00000893666 NAME STREET ADDRESS 14468 SURREY BEND STREET ADDRESS 04/23/08-80116-001 150.00 CITY-ST-ZIP SPRING HILL FL 34609 CITY-ST-ZIP TITLE VP D Daiete TITLE Change Addition ARNETT, HARRY NAME NAME STREET ADDRESS 14468 SURREY BEND STREET ADDRESS CITY-ST-ZIF SPRING HILL FL 34609 CITY-ST-ZIP ПΠЕ □ Derete TITLE Change Addition NAME NAME ARNETT, TORY STREET ADDRESS STREET ADDRESS 14468 SURREY BEND CITY-ST-ZIP CITY-ST-ZIP SPRING HILL FL 34609 TITLE ☐ Deⁱete TITLE Change Addition ARNETT, PATRICIA NAME MAME STREET ADDRESS 14468 SURREY BEND STREET ADDRESS CITY-ST-ZIP SPRING HILL FL 34609 CITY-ST-ZIP TITLE ☐ Delele ☐ Change ☐ Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-S1-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP

12. Thereby certify that the information supplied with this filling does not qualify for the exemptions contained in Section 119. Florida Statutes I further certify that the information indicated on this report or supplemental 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 rustee empowered to execute this report as required by Chapter 607. Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

GNATURE AND TYPES OF SPINTED NAME OF SIGNING OFFICER OR DIRECTOR

352-683-9/73