2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000129469

Entity Name: HC FLORIDA/NORTHERN GREENS, INC.

FILED Apr 27, 2009 Secretary of State

Current Principal Place of Business:			New Princi	New Principal Place of Business:	
191 NORTH WACKER DRIVE STE 2500 CHICAGO, IL 60606					
Current Mailing Address:			New Mailir	New Mailing Address:	
191 NORTH WACKER DRIVE STE 2500 CHICAGO, IL 60606					
FEI Number:	20-5699824	FEI Number Applied For ()	FEI Number Not Appli	licable () Certificate of Status Desired ()	
Name and Address of Current Registered Agent: Name and Address of New Registered Agent:					
C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324 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 Election Campaign Financing Trust Fund Contribution ().					
OFFICERS AND DIRECTORS: ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:					
Title: Name: Address: City-St-Zip:	D ()	Delete BLAS W BE BLVD STE 600	Title: Name: Address: City-St-Zip:	()Change ()Addition	
Title: Name: Address: City-St-Zip:	SMITH, JEFFRE	E BLVD STE 600	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	GRAY, LYNNE M	E BLVD STE 600	Title: Name: Address: City-St-Zip:	()Change ()Addition	
Title: Name: Address: City-St-Zip:	EDELMAN, HOW	CKER DRIVE, SUITE 2500	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	RYAN, COLLEE	CKER DRIVE, SUITE 2500	Title: Name: Address: City-St-Zip:	T (X) Change () Addition DE FRANCESCO, NOREEN 191 NORTH WACKER DRIVE, SUITE 2500 CHICAGO, IL 60606	
Title: Name: Address: City-St-Zip:	KURNICK, KARE	CKER DRIVE, SUITE 2500	Title: Name: Address: City-St-Zip:	()Change ()Addition	

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: KAREN A. KURNICK VS 04/27/2009