

2014 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000129666

Entity Name: HHC FOCUS FLORIDA, INC.**Current Principal Place of Business:**5960 SW 106TH AVENUE
COOPER CITY, FL 33328**Current Mailing Address:**367 S. GULPH RD.
KING OF PRUSSIA, PA 19406**FEI Number:** 20-3798265**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**CT CORPORATION SYSTEM
C/O C T CORPORATION SYSTEM
1200 SO. SOUTH ISLAND ROD
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**Officer/Director Detail :**

Title	PD
Name	OSTEEN, DEBRA K
Address	367 S. GULPH RD.
City-State-Zip:	KING OF PRUSSIA PA 19406

Title	VPD
Name	FILTON, STEVE
Address	367 S. GULPH RD.
City-State-Zip:	KING OF PRUSSIA PA 19406

Title	VPD
Name	HARROD, LAURENCE
Address	367 S. GULPH RD.
City-State-Zip:	KING OF PRUSSIA PA 19406

Title	S
Name	KLEIN, MATTHEW D
Address	367 S. GULPH RD.
City-State-Zip:	KING OF PRUSSIA PA 19406

Title	T
Name	RAMAGANO, CHERYL K
Address	367 S. GULPH RD.
City-State-Zip:	KING OF PRUSSIA PA 19406

I hereby 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 all other like empowered.

SIGNATURE: MATTHEW D. KLEIN**SECRETARY****03/13/2014**_____
Electronic Signature of Signing Officer/Director Detail_____
Date