

2015 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P97000028896

Entity Name: H & C CONCEPTS, INC.**Current Principal Place of Business:**8156 FIDDLERS CREEK PKWY
NAPLES, FL 34114**Current Mailing Address:**8156 FIDDLERS CREEK PKWY
NAPLES, FL 34114 US**FEI Number:** 59-3440993**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**WOODWARD, MARK J
3200 TAMiami TRAIL N., SUITE 200
NAPLES, FL 34103 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 VP
Name DINARDO, ANTHONY
Address 8156 FIDDLERS CREEK PKWY
City-State-Zip: NAPLES FL 34114

Title DIRECTOR, PRESIDENT
Name FERRAO, AUBREY J
Address 8156 FIDDLERS CREEK PKWY
City-State-Zip: NAPLES FL 34114

Title DIRECTOR
Name FERRAO, TINA M
Address 8156 FIDDLERS CREEK PKWY
City-State-Zip: NAPLES FL 34114

Title SECRETARY
Name PARISI, JOSEPH L
Address 8156 FIDDLERS CREEK PKWY
City-State-Zip: NAPLES FL 34114

Title DIRECTOR, TREASURER
Name FERRAO, MARISSA A
Address 8156 FIDDLERS CREEK PKWY
City-State-Zip: NAPLES FL 34114

Title DIRECTOR
Name FERRAO, DANIEL A
Address 8156 FIDDLERS CREEK PKWY
City-State-Zip: NAPLES FL 34114

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: JOSEPH LIVIO PARISI**SECRETARY****04/28/2015**

Electronic Signature of Signing Officer/Director Detail

Date