

**2016 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L02000033931

**FILED**  
**Mar 01, 2016**  
**Secretary of State**  
**CC5947232221**

**Entity Name:** HPPC, LLC

**Current Principal Place of Business:**

11999 PALBA WAY  
UNIT # 6402  
FORT MYERS, FL 33912

**Current Mailing Address:**

11999 PALBA WAY  
UNIT # 6402  
FORT MYERS, FL 33912 US

**FEI Number:** 86-1051818

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

SHIELDS, CHRISTOPHER JESQ  
1833 HENDRY STREET  
FT. MYERS, FL 33901 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

**Authorized Person(s) Detail :**

Title MGRM  
Name WEINER CORPORATION  
Address 11999 PALBA WAY  
UNIT # 6402  
City-State-Zip: FORT MYERS FL 33912

Title PRESIDENT  
Name WEINER, LESTER E  
Address 11999 PALBA WAY  
UNIT # 6402  
City-State-Zip: FORT MYERS FL 33912

Title SECRETARY  
Name WEINER, LESTER E  
Address 11999 PALBA WAY  
UNIT # 6402  
City-State-Zip: FORT MYERS FL 33912

*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 a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** LESTER WEINER

**PRESIDENT**

**03/01/2016**

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_  
Date