

**2015 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F10000000456

**Entity Name:** HC RECOVERY, INC.

**Current Principal Place of Business:**

9820 EAST 41ST STREET, SUITE 303  
TULSA, OK 74146

**Current Mailing Address:**

P.O.BOX 849  
SPRINGDALE, AR 72764

**FEI Number: 27-1397316**

**Certificate of Status Desired: No**

**Name and Address of Current 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

**Officer/Director Detail :**

Title P  
Name CENTER, THOMAS W  
Address 203 E EMMA STE A  
City-State-Zip: SPRINGDALE AR 72764

Title VPD  
Name SCOGIN, CLIFTON C  
Address 203 E EMMA STE A  
City-State-Zip: SPRINGDALE AR 72764

Title S  
Name VOGLE, MICHAEL F  
Address 9820 EAST 41ST STREET, SUITE 303  
City-State-Zip: TULSA OK 74146

Title DIRECTOR  
Name ROBERTSON, MARK  
Address 203 E EMMA AVE  
STE A  
City-State-Zip: SPRINGDALE AR 72764

*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: MARK ROBERTSON**

**CHIEF LEGAL OFFICER**

**03/02/2015**

Electronic Signature of Signing Officer/Director Detail

Date