

2016 FOREIGN NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F15000005637

**FILED
Mar 15, 2016
Secretary of State
CC7123035168**

Entity Name: HEARCARE CONNECTION INC.

Current Principal Place of Business:

9604 COLDWATER ROAD STE 109
FORT WAYNE, IN 46825

Current Mailing Address:

9604 COLDWATER ROAD STE 109
FORT WAYNE, IN 46825 US

FEI Number: 45-2803181

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

THORPE, MARY
2800 HILLVIEW STREET
SARASOTA, FL 34239 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 C,BOARD PRESIDENT
Name STEWART, NORA M.A.
Address 5933 EAST STATE BLVD
City-State-Zip: FORT WAYNE IN 46825

Title VC
Name MORAN, DAVID
Address 3909 NEW VISION DRIVE
City-State-Zip: FORT WAYNE IN 46845

Title D,CPA-TREASURER
Name ROTH, DOUG
Address 6502 NELSON ROAD
City-State-Zip: FORT WAYNE IN 46803

Title D
Name YANEZ, MIGUEL
Address 5931 NORTH BRIDGE RD
City-State-Zip: FORT WAYNE IN 46814

Title P
Name BOGDON, ANNA
Address 9604 COLDWATER ROAD STE 109
City-State-Zip: FORT WAYNE IN 46825

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 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: ANNA BOGDON

EXECUTIVE DIRECTOR

03/15/2016

Electronic Signature of Signing Officer/Director Detail

Date