

2017 FOREIGN NOT FOR PROFIT CORPORATION ANNUAL REPORT

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FILED
Jan 26, 2017
Secretary of State
CC7005654538

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 DIRECTOR
Name STEWART, NORA M.A.
Address 5933 EAST STATE BLVD
City-State-Zip: FORT WAYNE IN 46825

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

Title PRESIDENT
Name BONAHOOM, JOE
Address 110 W BERRY ST
 STE 1900
City-State-Zip: FORT WAYNE IN 46802

Title VP, TREASURER
Name PIANO, LARRY
Address 4620 WYNDEMERE LANE
City-State-Zip: FORT WAYNE IN 46835

Title SECRETARY
Name LIBEY, JUSTIN
Address 116 E BERRY STREET
City-State-Zip: FORT WAYNE IN 46802

Title DIRECTOR
Name SMITH, CURTIS
Address 10501 CORPORATE DR
City-State-Zip: FORT WAYNE IN 46845

Title DIRECTOR
Name FREIBURGER, JOHN
Address 4716 SPEEDWAY DR
City-State-Zip: FORT WAYNE IN 46825

Title DIRECTOR
Name BICKLEY, DENISE
Address 9604 COLDWATER RD
 STE 101
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

01/26/2017

Electronic Signature of Signing Officer/Director Detail

Date