


**2008 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
May 02, 2008 08:00 AM
Secretary of State

DOCUMENT # 369208 1. Entity Name HENDERSON INVESTMENT CORP.	
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Principal Place of Business 855 DIXIE PARKWAY P.O. BOX 150-32790 WINTER PARK, FL 32789	Mailing Address 855 DIXIE PARKWAY P.O. BOX 150-32790 WINTER PARK, FL 32789
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01032008 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number 59-1302607	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent HENDERSON, EDMOND R 855 DIXIE PKWY WINTER PARK, FL 32789
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DO NOT WRITE IN THIS SPACE

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE _____

FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD HENDERSON, EDMOND R 855 DIXIE PARKWAY WINTER PARK, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VAS HENDERSON, EDMOND R., JR. 855 DIXIE PKWY. WINTER PARK, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VAT HENDERSON, JOY LYNN 855 DIXIE PKWY. WINTER PARK, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

<p>U00000944321 05/29/08-80096-008 150.00</p> <p>DO NOT WRITE IN THIS SPACE</p>
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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Edmond R Henderson **EDMOND R HENDERSON** 4/29/8 4/07/6/5-1225-
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #