2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 377037

1125 12TH STREET

VERO BEACH, FL

Address: City-St-Zip:

FILED Jan 27, 2009 Secretary of State

Entity Name: WILLIAM H. HENSICK & SONS, INC.						
Current Principal Place of Business:				New Principal Place of Business:		
1125 12TH STREET VERO BEACH, FL 32960				1125 12TH STREET SUITE C VERO BEACH, FL 32960		
Current Mailing Address:				New Mailing Address:		
1125 12TH STREET VERO BEACH, FL 32960				1125 12TH STREET SUITE C VERO BEACH, FL 32960		
FEI Number:	59-1316155	FEI Number Appl	ied For () FEI Nur	nber Not Applicable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent:				Name and Address of New Registered Agent:		
HENSICK, NORMAN W., JR. 1125 12TH STREET VERO BEACH, FL 32960 US				HENSICK, NORMAN W P 1125 12TH STREET SUITE C VERO BEACH, FL 32960 US		
The above in the State		ty submits this state	ment for the purpose o	of changing its registered	office or registered agent, or both,	
SIGNATURE: NORMAN W. HENSICK				01/27/2009		
Electronic Signature of Registered Agent					Date	
Election Carr	paign Finand	cing Trust Fund Contril	oution ().			
OFFICERS AND DIRECTORS:				ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	V HENSICK, V 1125 12TH S VERO BEAC	STREET		Title: Name: Address: City-St-Zip:	()Change ()Addition	
Title: Name: Address: City-St-Zip:	STD HENSICK, E 1125 12TH S VERO BEAC			Title: Name: Address: City-St-Zip:	()Change ()Addition	
Title: Name:	PD HENSICK, N	()Delete ORMAN W JR,		Title: Name:	() Change () Addition	

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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 an address, with all other like empowered.

Address:

City-St-Zip:

SIGNATURE: NORMAN W. HENSICK PD 01/27/2009