## 2007 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

## **FILED** Feb 02, 2007 08:00 AM Secretary of State **DOCUMENT # 426434** 1. Entity Namo HENDRICKS RENTALS, INC. Principal Place of Business Mailing Address 2826 BROADWAY 2826 BROADWAY 201 RIVIERA BEACH FL 33404 RIVIERA BEACH FL 33404 2. Principal Place of Business - No P.O. Box # 3. Mailing Address Suite Apt # etc. Suite, Apt. #, etc. 1st MOORE CR2E034 (10/06) City & State City & State 4. FEI Number Applied For 59-1479272 Not Applicable Zip Country Country \$8.75 Additional 5. Cortificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name HENDRICKS, LARRY D Street Address (P.O. Box Number is Not Acceptable) 2826 BROADWAY STE 201 RIVIERA BEACH FL 33404 City Zip Code 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 SIGNATURE . Signature, typed or printed name of registered agent and title in applicable. DATE (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 9. Election Campaign Financing \$5.00 May Be After May 1, 2007 Fee Will Be \$550.00 Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State OFFICERS AND DIRECTORS 10. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. PD 11111 Adostion ☐ Delete TITLE Change HENDRICKS, LARRY D. NAME NAME U000000618269 8030 154TH RD. N. STREET ADDRESS STREET ADDRESS 02/08/07-80022-019 150.00 PALM BEACH GARDENS FL 33418 CITY-ST-ZIP CITY+S1-7(P Delete IIIU, Change Addition HENDRICKS, GAYLOR E. NAME NAMI. 19697 N. RIVERSIDE DR STREET ADDRESS STREET ADDRESS **TEQUESTA FL 33469** CITY ST-7IP CITY-ST-7IP TITLE Delete TITLE ☐ Change ■ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY - ST - ZIF CITY-ST-ZIP Defete THLE ☐ Change ☐ Add₁lion NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP THIE Delete ШЕ ☐ Change ■ Addition NAME NAME STREET ADDRESS STREET ADDRESS CLTY-ST-7IP CITY-ST-ZIP TITLE Change Delete TITLE Addition NAME NAME: STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-SI-ZIP 12. I horoby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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 changod, or on an attachment with an address, with all other like empowered.

Levry D. Heyedricks

SIGNATURE: Jacob Standards Act | 1/30/07 | 561-848-4331