

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 692106

FILED
Jan 06, 2005
Secretary of State

Entity Name: HENSCRATCH INVESTMENTS, INC.

Current Principal Place of Business:

6813 US 27S
SEBRING, FL 33870 US

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 3332
SEBRING, FL 33871 US

New Mailing Address:

FEI Number: 59-2102459

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BENEVIDEL, LOUIS
1741 US 27S
SEBRING, FL 33870 US

Name and Address of New Registered Agent:

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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: PELLA, EDWARD E,
Address: 904 LAKE JOSEPHINE DRIVE
City-St-Zip: SEBRING, FL

Title: VST () Delete
Name: PELLA, DENNIS R,
Address: 904 LAKE JOSEPHINE DRIVE
City-St-Zip: SEBRING, FL

Title: D () Delete
Name: PELLA, DENNIS R,
Address: 904 LAKE JOSEPHINE DRIVE
City-St-Zip: SEBRING, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: PELLA, EDWARD E,
Address: 904 LAKE JOSEPHINE DRIVE
City-St-Zip: SEBRING, FL 33875

Title: VST (X) Change () Addition
Name: PELLA, DENNIS R,
Address: 904 LAKE JOSEPHINE DRIVE
City-St-Zip: SEBRING, FL 33875

Title: D (X) Change () Addition
Name: PELLA, DENNIS R,
Address: 904 LAKE JOSEPHINE DRIVE
City-St-Zip: SEBRING, FL 33875

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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.

SIGNATURE: EDWARD E. PELLA

PD

01/06/2005

Electronic Signature of Signing Officer or Director

Date