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PROFIT CORPORATION ANNUAL REPORT

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CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 854991

(7)

HENDERSON GROUP ARCHITECTS, INCORPORATED

Principal Place of Business Mailing Address % THE HENDERSON GROUP, INC. % THE HENDERSON GROUP, INC. 100 8.BRENTWOOD BLVD..STE.350 100 S.BRENTWOOD BLVD..STE.350 STLOUIS MO 63105 ST.LOUIS MO 63105-1635 3. Date Incorporated or Qualified 3a. Date of Last Report 12/16/1982 05/01/1996 2. Principal Place of Business 2a. Mailing Address FEI Number Applied For 43-1166381 Not Applicable 21 Sulte, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 Trust Fund Contribution Added to Fees 28 Zip Country Country 8. This corporation has liability for intangible tax under s. 199.032, 24 29 Florida Statutos Yes No 10. Name and Address of New Registered Agent 9, Name and Address of Current Registered Agent 81 CORPORATION INFORMATION SERVICES, INC. 1201 HAYES STREET 82 Street Address (P.O. Box Number is Not Acceptable) TALLAHASSEE FL 32301 83 84 City Zip Code 11. Pursuant to the provisions of Sections 607.05.02 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Signature, typed or printed name of regulered agent and title if applicable. (NOTE: Registered Agent signature required when reinstaing) 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 DELETE Change Addition TITLE 1.1 THUE HENDERSON, PAUL J. NAME 1.2 NAME 100 S.BRENTWOOD BLVD#350 STREET ADORESS 1.3 STREET ADORESS ST. LOUIS MO CITY-ST-ZIP 1.4 CITY - ST - 7IP DELETE Change Addition TITLE 21 TITLE VON HATTEN, MICHAEL E. NAME 2.2 NAME 100 S.BRENTWOOD BLVD#350 STREET ADDRESS 2.3 STREET ADDRESS ST. LOUIS MO CITY-ST-ZIP 2. 4 C(1Y - S1 - Z(P DELETE Change Addition TITLE 3.1 TITLE 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4. CHY - S1 - 2IP DELETE Change Addition TITLE 4.1 TITLE NAME 4. 2 NAME 4.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 4 4 CITY-ST-ZIP DELETE Change Addilion TITLE 5.1 THEF NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS

5.4 CHY+S1-7IP

6.3 STREET ADDRESS

61 TITLE

6.2 NAME

DELETE

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report as supplemental annual report is true and accurate and that my signature shall have the same logal effect as if made under oath; that I am an officer or director of the corporation of the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, of on up ittely medic with an address.

Paul J. Henderson, Pres 314-721-1004

Change

Addition

FILED

Apr 21 1997 8:00am

Secretary of State